

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26774

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** ARBOR COURTS AT JACARANDA ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O J&L PROPERTY MGMT., INC.  
10191 W. SAMPLE ROAD STE 203  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

C/O J&L PROPERTY MGMT., INC.  
10191 W. SAMPLE ROAD STE 203  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 65-0090373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CALDERAZZO, JAMES  
10191 WEST SAMPLE RD  
SUITE 203  
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GRUBER, MARK  
Address: 564 NW 97TH AVE  
City-St-Zip: PLANTATION, FL 33324

Title: VP  
Name: LEON, LOURDES  
Address: 582 NW 97TH AVE  
City-St-Zip: PLANTATION, FL 33324

Title: D  
Name: ALVAREZ, CHRIS  
Address: 597 NW 98TH AVE.  
City-St-Zip: PLANTATION, FL 33324

Title: S  
Name: GINDEA, ELINOR  
Address: 556 NW 97TH AVE  
City-St-Zip: PLANTATION, FL 33324

Title: T  
Name: MORANO, LIBERTY  
Address: 576 NW 97TH AVE  
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES CALDERAZZO

RA

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date