

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29439

FILED
Mar 02, 2011
Secretary of State

Entity Name: JACARANDA POINTE MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

% J & L PROPERTY MGMT., INC.
10191 W. SAMPLE RD STE 203
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

% J & L PROPERTY MGMT., INC.
10191 W. SAMPLE RD STE 203
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 65-0095173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERAZZO, JAMES
10191 W. 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: VP
Name: HUSBANDS, CORNELIA
Address: 9528 NW 8 CIRCLE
City-St-Zip: PLANTATION, FL 33324

Title: P
Name: STOUT, SHIRLEY
Address: 9446 NW 8TH CIRCLE
City-St-Zip: PLANTATION, FL 33324

Title: S
Name: CROSSLEY, STEPHANIE
Address: 9324 NW 8 CIRCLE
City-St-Zip: PLANTATION, FL 33324

Title: T
Name: NEWMAN, RONALD N
Address: 9604 NW 8 CIRCLE
City-St-Zip: PLANTATION, FL 33324

Title: D
Name: HUSBAND, BARTLEY
Address: 9528 NW 8TH CIRCLE
City-St-Zip: PLANTATION, FL 33324

Title: D
Name: JAISAREE, EDDIE
Address: 9358 NW 8TH CIRCLE
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

03/02/2011

Electronic Signature of Signing Officer or Director

_____ Date