

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 729996

**Entity Name:** WIMBLEDON AT JACARANDA CONDOMINIUM NO. 1, INC.

**Current Principal Place of Business:**

C/O WEST BROWARD COMMUNITY MANAGEMENT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317

**Current Mailing Address:**

C/O WEST BROWARD COMMUNITY MANAGEMENT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317 US

**FEI Number:** 59-1522504

**Certificate of Status Desired:** No

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

WEST BROWARD COMMUNITY MANAGEMENT  
C/O WEST BROWARD COMMUNITY MANAGEMENT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317 US

*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:** THOMAS FIORE

10/06/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TABASH, CAROLINE  
Address        C/O WEST BROWARD COMMUNITY  
                  MANAGEMENT  
                  820 SOUTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title            TREASURER  
Name            GORMLEY, JOANMARIE  
Address        C/O WEST BROWARD COMMUNITY  
                  MANAGEMENT  
                  820 SOUTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title            VP  
Name            KHAWAJA, WASEEM  
Address        820 SOUTH STATE RD 7  
City-State-Zip: PLANTATION FL 33317

Title            SECRETARY  
Name            SOLAR, ANGEL  
Address        820 STATE RD 7  
City-State-Zip: PLANTATION FL 33317

Title            DIRECTOR  
Name            TABASH, FADI  
Address        820 STATE RD 7  
City-State-Zip: PLANTATION FL 33317

*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:** CAROLINE TABASH

PRESIDENT

10/06/2023

Electronic Signature of Signing Officer/Director Detail

Date