2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741320

INC.

Entity Name: CAMINO SHERIDAN VILLAS HOMEOWNERS ASSOCIATION,

Current Principal Place of Business:

7120 W. MCNAB RD TAMARAC, FL 33321

Current Mailing Address:

7120 W. MCNAB RD TAMARAC, FL 33321 US

FEI Number: 59-1958133 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESTIGE ACCOUNTING & BOOKKEEPING INC 7120 W. MCNAB RD TAMARAC, FL 33321 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: JESSICA MAHADEO 03/30/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title	D	Title	D
Name	YANES, YUMAY	Name	SHANE, SCOT
Address	7120 W. MCNAB RD	Address	7120 W. MCNAB RD
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321
Title	VP	Title	D
Name	SCHNIEDER, FELICE	Name	NODAL, PETER
Address	7120 W. MCNAB RD	Address	7120 W. MCNAB RD
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321
Title	P	Title	T, TREASURER
Title Name	P SHANE , RANDIE	Title Name	T, TREASURER LANGLOIS, ANDRE
			•
Name	SHANE , RANDIE	Name	LANGLOIS, ANDRE
Name Address	SHANE , RANDIE 7120 W. MCNAB RD	Name Address	LANGLOIS, ANDRE 7120 W. MCNAB RD
Name Address City-State-Zip:	SHANE , RANDIE 7120 W. MCNAB RD TAMARAC FL 33321	Name Address City-State-Zip:	LANGLOIS, ANDRE 7120 W. MCNAB RD TAMARAC FL 33321
Name Address City-State-Zip:	SHANE , RANDIE 7120 W. MCNAB RD TAMARAC FL 33321	Name Address City-State-Zip: Title	LANGLOIS, ANDRE 7120 W. MCNAB RD TAMARAC FL 33321 SECRETARY
Name Address City-State-Zip: Title Name	SHANE , RANDIE 7120 W. MCNAB RD TAMARAC FL 33321 D LANGLOIS , MADELINE	Name Address City-State-Zip: Title Name	LANGLOIS, ANDRE 7120 W. MCNAB RD TAMARAC FL 33321 SECRETARY LEON, PATRICIA

Continues on page 2

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.

03/30/2015 SIGNATURE: RANDIE SHANE **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 30, 2015

Secretary of State

CC5012645176

Officer/Director Detail Continued:

Title D Title D

NameOLSEN , MARYLNameCOLLINS, JANETAddress7120 W. MCNAB RDAddress7120 W. MCNAB RDCity-State-Zip:TAMARAC FL 33321City-State-Zip:TAMARAC FL 33321