2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10937

Entity Name: JACARANDA AT CENTRAL PARK RECREATION ASSOCIATION

ONE, INC.

FILED
Jan 17, 2020
Secretary of State
1945089580CC

Current Principal Place of Business:

C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC 7124 N NOB HILL RD TAMARAC, FL 33321

Current Mailing Address:

C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC 7124 N NOB HILL RD TAMARAC, FL 33321 US

FEI Number: 59-2646227 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE, SUITE 329 PLANTATION, FL 33324 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: JOHN STEVENS 01/17/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title PRESIDENT

Name STEIN, LINDA Name SACHS, CAROL

Address C/O CONSOLIDATED COMMUNITY Address C/O CONSOLIDATED COMMUNITY

MANAGEMENT, INC
7124 N NOB HILL RD
MANAGEMENT, INC
7124 N NOB HILL RD

City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title VP Title SECRETARY

Name SCHRAGER, S.M Name PIETRANTON, SHARON

Address C/O CONSOLIDATED COMMUNITY Address C/O CONSOLIDATED COMMUNITY

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7124 N NOB HILL RD
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City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name GALGANO, ANN

Address C/O CONSOLIDATED COMMUNITY

MANAGEMENT, INC 7124 N NOB HILL RD

City-State-Zip: TAMARAC FL 33321

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: CAROL SACHS PRESIDENT 01/17/2020