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.

PRES

reby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same
that I am an officer or director of the corneration or the receiver or tructor amouvered to execute this report of required by Chapter 617. Elevide Statu

City-State-Zip: TAMARAC FL 33321

Electronic Signature of Signing Officer/Director Detail

# 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			
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	TREASURER	Title	PRESIDENT	
Name	STEIN, LINDA	Name	SACHS, CAROL	
Address	C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC 7124 N NOB HILL RD	Address	C/O CONSOLIDATED COMMUNIT MANAGEMENT, INC 7124 N NOB HILL RD	Y
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 MANAGEMENT, INC 7124 N NOB HILL RD	Address	C/O CONSOLIDATED COMMUNIT MANAGEMENT, INC 7124 N NOB HILL RD	Y
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			

PLANTATION, FL 33324 US

**Current Mailing Address:** 

7124 N NOB HILL RD

TAMARAC, FL 33321 US

### FEI Number: 59-2646227

### Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE, SUITE 329

# Certificate of Status Desired: No

## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N10937

Entity Name: JACARANDA AT CENTRAL PARK RECREATION ASSOCIATION ONE, INC.

## **Current Principal Place of Business:**

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

C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC

# 04/04/2019



## FILED Apr 04, 2019 Secretary of State 9609592056CC