

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715867

**Entity Name:** JAMAICA ROYALE UNIT ONE, INC.**Current Principal Place of Business:**5830 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242**Current Mailing Address:**5830 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242**FEI Number:** 59-0936695**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAVIS, THOMAS ALAN  
5830 MIDNIGHT PASS RD  
SARASOTA, FL 34242 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                       |
|-----------------|-----------------------|
| Title           | P                     |
| Name            | NOLL, DEREK           |
| Address         | 5830 MIDNIGHT PASS RD |
| City-State-Zip: | SARASOTA FL 34242     |

|                 |                         |
|-----------------|-------------------------|
| Title           | T                       |
| Name            | PEHOSKI, KIRBY          |
| Address         | 5830 MIDNIGHT PASS ROAD |
| City-State-Zip: | SARASOTA FL 34242       |

|                 |                       |
|-----------------|-----------------------|
| Title           | S                     |
| Name            | OVERDORF, DAVID       |
| Address         | 5830 MIDNIGHT PASS RD |
| City-State-Zip: | SARASOTA FL 34242     |

|                 |                       |
|-----------------|-----------------------|
| Title           | VP                    |
| Name            | SKALET, JOHN T        |
| Address         | 5830 MIDNIGHT PASS RD |
| City-State-Zip: | SARASOTA FL 34242     |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | THOMAS, STEVEN        |
| Address         | 5830 MIDNIGHT PASS RD |
| City-State-Zip: | SARASOTA FL 34242     |

|                 |                         |
|-----------------|-------------------------|
| Title           | 2VP                     |
| Name            | DAVIS, THOMAS A         |
| Address         | 5830 MIDNIGHT PASS ROAD |
| City-State-Zip: | SARASOTA FL 34242       |

*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:** THOMAS A. DAVIS

2VP

03/20/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date