

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724903

**Entity Name:** JAMESTOWN ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUITE 220  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUIRE 220  
BOYNTON BEACH, FL 33426 US

**FEI Number:** 59-1594995

**Certificate of Status Desired:** No

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

ROSENBAUM PLLC  
250 SOUTH AUSTRALIAN AVENUE  
5TH FLOOR  
WEST PALM BEACH, FL 33401 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:** LAUREN FEFFER

03/05/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BURG, ZEEV  
Address C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUITE 220  
City-State-Zip: BOYNTON BEACH FL 33426

Title PRESIDENT  
Name CUSHMAN, LISA D  
Address C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUITE 220  
City-State-Zip: BOYNTON BEACH FL 33426

Title SECREATRY  
Name LEGAN, PATRICIA  
Address C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUITE 220  
City-State-Zip: BOYNTON BEACH FL 33426

Title TREASURER  
Name OCAMPO, LUZ-MERY  
Address C/O HOWE MANAGEMENT  
1500 GATEWAY BLVD. SUITE 220  
City-State-Zip: BOYNTON BEACH FL 33426

*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:** LISA D CUSHMAN

PRESIDENT

03/05/2021

Electronic Signature of Signing Officer/Director Detail

Date