

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728615

**Entity Name:** JAMAICA ROYALE MANAGEMENT, INC.

**Current Principal Place of Business:**

5830 MIDNIGHT PASS RD.  
SARASOTA, FL 34242

**Current Mailing Address:**

5830 MIDNIGHT PASS RD.  
SARASOTA, FL 34242

**FEI Number:** 59-1506326

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT  
#200  
FT. MYERS, FL 33966 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 VP  
Name HURLEY, ROBERT  
Address 5830 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

Title S  
Name RICHARDSON, RUTH  
Address 5830 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

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

Title 2VP  
Name DAVIS, THOMAS  
Address 5830 MIDNIGHT PASS RD.  
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 DAVIS

2VP

03/21/2013

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

\_\_\_\_\_  
Date