

2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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 US

FEI Number: 59-1506326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANNINA, SAMIE L
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: SAMIE L. MANNINA

09/29/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KLOSNER, GREG
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title VP
Name HARTLEY III, JAMES RONALD
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title SECRETARY
Name KENNEDY, RITA
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name CRIDER, DOUG
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name BEYNON, TOD
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name SMENNER, DICK
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR, TREASURER
Name MANNINA, SAMIE L
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name FARMER, JOHN
Address 5830 MIDNIGHT PASS RD.
City-State-Zip: SARASOTA FL 34242

Continues on page 2

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: SAMIE MANNINA

TREASURER

09/29/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CALENGOR, GERALD
Address 5830 MIDNIGHT PASS ROAD
 #58
City-State-Zip: SARASOTA FL 34242