

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091670

Entity Name: JUMP STREET MANAGEMENT, INC.**Current Principal Place of Business:**8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446**Current Mailing Address:**8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446**FEI Number: 56-2294138****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHRISTENSEN, ROBERT R
8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446 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 VP
Name TATE, LARRY
Address 11 BYRSONIMA CT. WEST
City-State-Zip: HOMOSASSA FL 34446

Title S
Name JACOBY, JAMES J
Address 481 N.W. 14TH PLACE
City-State-Zip: CRYSTAL RIVER FL 34428

Title DIRECTOR
Name MAUGHAN, NELSON W SR.
Address 44 CYPRESS BLVD W
City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR
Name BARTLE, SHERYL L
Address 5515 N ROSEDALE CIRCLE
City-State-Zip: BEVERLY HILLS FL 34465

Title PRESIDENT
Name AUSTIN, TERRY V
Address 3831 N CATBIRD PT
City-State-Zip: CRYSTAL RIVER FL 34428

Title T
Name CHRISTENSEN, ROBERT R
Address 4 SHORTLEAF COURT W.
City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR
Name PONTICOS, STEPHAN E
Address 7 BYRSONIMA CT W
City-State-Zip: HOMOSASSA FL 34446

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT R CHRISTENSEN**TREASURER****02/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date