2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 210444

Address:

271 S OCEAN BLVD

City-St-Zip: HIGHLAND BEACH, FL

Entity Name: JAMAICA MANOR INC

FILED Jan 25, 2008 Secretary of State

		W/ WORCHVO			
Current Principal Place of Business:			New Principal Place	of Business:	
	TH OCEAN BO D BEACH, FL (
Current Mailing Address:			New Mailing Address:		
	TH OCEAN BO D BEACH, FL :				
FEI Number	: 59-0954169	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
2711 S. O APT 9	DNE, SAMUEL CEAN BLVD. D BCH., FL 33				
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () ADAMS, EDWA 2711 S OCEAN HIGHLAND BCH	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () THURMAN, TOD 2711 S OCEAN HIGHLAND BEA	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () MADDALONE, S 2711 S OCEAN HIGHLAND BEA	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SEXTON, RHON 2711 S OCEAN HIGHLAND BEA	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () BELLANTE, DAN	Delete N	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address: City-St-Zip:

SIGNATURE: TODD THURMAN ST 01/25/2008