

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90020 041 ****61.25

DOCUMENT # 715654	
1. Entity Name JAMAICA HOUSE ASSOCIATION, INC.	

Principal Place of Business 305 POMPANO BEACH BLVD. POMPANO BEACH FL 33062	Mailing Address 305 POMPANO BEACH BLVD. POMPANO BEACH FL 33062
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-1232609	Applied For ☐ \$8.75 Additional Fee Required
5. Certificate of Status Desired ☐	



1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent KAYE & ROGER P.A. 6261 NW 6TH WAY SUITE 103 FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature is required when registering)	DATE
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FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE VPD	☐ Delete
NAME POLASKE, EUGENE	
STREET ADDRESS 305 N POMPANO BEACH BLVD	
CITY-ST-ZIP POMPANO BEACH FL 33062	
TITLE SD	☒ Delete
NAME GONZALEZ, JUAN	
STREET ADDRESS 305 N POMPANO BEACH BLVD	
CITY-ST-ZIP POMPANO BEACH FL 33062	
TITLE TD	☐ Delete
NAME SCHMIDT, DORIS	
STREET ADDRESS 305 N POMPANO BCH BLVD.	
CITY-ST-ZIP POMPANO BCH FL	
TITLE SD	☐ Delete
NAME AIMONE, JUDY	
STREET ADDRESS 305 N. POMPANO BCH BLVD.	
CITY-ST-ZIP POMPANO BEACH FL 33062	
TITLE P	☒ Delete
NAME PEPPE, JOHN	
STREET ADDRESS 305 N POMPANO BCH BLVD	
CITY-ST-ZIP POMPANO BEACH FL 33062	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Judy Aimone, Board Secretary 1/30/08