

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715654

FILED
Apr 21, 2009
Secretary of State

Entity Name: JAMAICA HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

305 POMPANO BEACH BLVD.
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

305 POMPANO BEACH BLVD.
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1232609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYE & ROGER P.A.
6261 NW 6TH WAY
SUITE 103
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: POLASKE, EUGENE
Address: 305 N POMPANO BEACH BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: SCHMIDT, DORIS
Address: 305 N POMPANO BCH BLVD.
City-St-Zip: POMPANO BCH, FL

Title: SD () Delete
Name: AIMONE, JUDY
Address: 305 N. POMPANO BCH BLVD.
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: SCHMIDT, DORIS
Address: 305 N POMPANO BEACH BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD (X) Change () Addition
Name: GORDON, BARBARA
Address: 305 N POMPANO BCH BLVD.
City-St-Zip: POMPANO BCH, FL

Title: SD (X) Change () Addition
Name: WRIGHT, NATHAN
Address: 305 N. POMPANO BCH BLVD.
City-St-Zip: POMPANO BEACH, FL 33062

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

SIGNATURE: DORIS SCHMIDT

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date