

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716603

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** JAMAICA ROYALE CONDOMINIUM TWO, INC.

**Current Principal Place of Business:**

5830 MIDNIGHT PASS ROAD  
SARASOTA, FL 342422108

**New Principal Place of Business:**

**Current Mailing Address:**

10531 BAY BRIDGE RD  
FORT WAYNE, IN 342422108

**New Mailing Address:**

10531 BAY BRIDGE RD  
FORT WAYNE, IN 468456414

**FEI Number:** 59-1364508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICHARDSON, RUTH A  
5830 MIDNIGHT PASS RD, #107  
SARASOTA, FL 34242 US

**Name and Address of New Registered Agent:**

RICHARDSON, RUTH A  
5830 MIDNIGHT PASS RD, #107  
SARASOTA, FL 342422108 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: RUTH RICHARDSON

04/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TRABEL, PAUL  
Address: 6404 HARTZELL RD  
City-St-Zip: FORT WAYNE, IN 46816

Title: VP ( ) Delete  
Name: LORTS, DAN  
Address: 1438 CROOKS RD  
City-St-Zip: CLAWSON, MI 48017

Title: ST ( ) Delete  
Name: RICHARDSON, RUTH  
Address: 10531 BAY BRIDGE RD.  
City-St-Zip: FORT WAYNE, IN 46845

Title: D ( ) Delete  
Name: GRUTZA, ROBERT  
Address: 1123 BRECKEN RIDGE RD  
City-St-Zip: LAKE FOREST, IL 60045

Title: D ( ) Delete  
Name: HOWARD, JAMES  
Address: 113 RING RD  
City-St-Zip: SCITUATE, MA 020061441

Title: D ( ) Delete  
Name: OSTMAN, ELEANOR  
Address: 142 FOREST RD  
City-St-Zip: GLEN ROCK, NJ 07452 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RUTH RICHARDSON

ST

04/21/2009

Electronic Signature of Signing Officer or Director

Date