

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -2 PM 3: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734773 (5)

1. Corporation Name

THE JAMAICA BAY HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

31005 JAMAICA BAY DR.
BOYTON BCH FL 33436

31005 JAMAICA BAY DR.
BOYTON BCH FL 33436

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1975

3a. Date of Last Report

02/11/1994

4. FEI Number

23-7294027

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIBELLO, CARL
50012 HACHA BAY
BOYNTON BCH. FL 33436

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

DIBELLO, CARL

STREET ADDRESS

50012 HACHA BAY

CITY - ST - ZIP

BOYNTON BCH FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

PD

BRETT RUTH

4203 JIMA BAY

BOYNTON BCH FL

☒ Change ☐ Addition

TITLE

S

NAME

GOLDSTEIN, LORNA

STREET ADDRESS

56015 AMPARO BAY

CITY - ST - ZIP

BOYNTON BCH FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

T

NAME

DUFFY, MARJORIE F

STREET ADDRESS

54008 CHABELLA BAY

CITY - ST - ZIP

BOYNTON BCH FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

VP

NAME

BRETT, RUTH

STREET ADDRESS

1013 ANDROS BAY

CITY - ST - ZIP

BOYNTON BEACH FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

VP

OGLE, NORMA

54017 CHAPELLA BAY

BOYNTON BCH FL

☒ Change ☐ Addition

TITLE

D

NAME

BLANCHE, CLARK

STREET ADDRESS

40008 HUMACO BAY

CITY - ST - ZIP

BOYNTON BCH FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE

D

NAME

VACANTE, FRANK

STREET ADDRESS

52002 FLORINADA BAY

CITY - ST - ZIP

BOYNTON BCH FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

D

MACLEOD, ETHEL

5006 CURACAS BAY

BOYNTON BCH FL

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARJORIE F. DUFFY

2/27/95 407-738-1747

SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICIAL (DIRECTOR)

(Typed Name)

0019031