

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737543

FILED
Jan 19, 2009
Secretary of State

Entity Name: JAMAICA BAY CLUB, INC.

Current Principal Place of Business:

26 DOMINGO CT.
JAMAICA BAY
FT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

26 DOMINGO CT.
JAMAICA BAY
FT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 59-6609399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUMOR, LUCY M
58 OCOA COURT
FORT MYERS, FL 33912 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: P () Delete
Name: AVINO, ROSE
Address: 253 WECAWA DR.
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: DENBESTON, ROSE
Address: 23 SALUT CT.
City-St-Zip: FORT MYERS, FL 33912

Title: T () Delete
Name: SUMOR, LUCY M
Address: 58 OCOA COURT
City-St-Zip: FORT MYERS, FL 33912

Title: S () Delete
Name: OWENS, MARY JO
Address: 35 MATA COURT
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEINZ, LYNN
Address: 41 ULATA CT.
City-St-Zip: FORT MYERS, FL 33912

Title: VP (X) Change () Addition
Name: RAPPATONE, CARMAN
Address: 52 NORIE CT..
City-St-Zip: FORT MYERS, FL 33912

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: LUCY M. SUMOR

TREA

01/19/2009

Electronic Signature of Signing Officer or Director

Date