

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90010 027 ****61.25

DOCUMENT # 744898

1. Entity Name

JAMESTOWN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O S & R PORPERTY MGMT
 3129 - 49TH ST NORTH
 ST PETERSBURG FL 33710
 US

8470-12ST NO
 ST PETE FL 33702
 US

2. Principal Place of Business

90 All Florida Realty

3. Mailing Address

Suite, Apt. #, etc.
11270 4th St. N #216

Suite, Apt. #, etc.

City & State
St. Petersburg FL

City & State

Zip Country
33716 U.S.

Zip Country

4. FEI Number **59-2043073**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ALL FLORIDA REALTY SERVICES, INC.
 11270 4TH ST. N. #216
 ST PETERSBURG FL 33716

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME Delete
P
LYNCH, THERESA
 STREET ADDRESS **1303-B 83RD AVE NORTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33702**

TITLE NAME Delete
D
CORTIS, JOANNE
 STREET ADDRESS **8565C-12 WAY NO**
 CITY-ST-ZIP **ST. PETERSBURG FL 33702**

TITLE NAME Delete
VP
MARKS, PATRICIA
 STREET ADDRESS **1295 D 85 AVE N**
 CITY-ST-ZIP **ST. PETERSBURG FL 33702**

TITLE NAME Delete
D
MCKENZIE, ANN
 STREET ADDRESS **8585D-12WAY NO**
 CITY-ST-ZIP **ST PETE FL 33702**

TITLE NAME Delete
T
KRISCO, MARK
 STREET ADDRESS **13170 84 RD N**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

TITLE NAME Delete
D
RUBIN, JEAN
 STREET ADDRESS **1263D 84 AVE N**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME Change Addition
Lenny Campbell
 STREET ADDRESS **1162 A 84th Terr N**
 CITY-ST-ZIP **St. Petersburg FL 33702**

TITLE NAME Change Addition
D
John Gibb
 STREET ADDRESS **1143 A 85th Terr N**
 CITY-ST-ZIP **St. Petersburg FL 33702**

TITLE NAME Change Addition
D
Bill Logre
 STREET ADDRESS **1123 B 85 Terr N**
 CITY-ST-ZIP **St. Petersburg FL 33702**

TITLE NAME Change Addition

TITLE NAME Change Addition

TITLE NAME Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/01

Date

Daytime Phone #

CR2E037 (10/00)