## **2002 UNIFORM BUSINESS REPORT (UBR)** FILED May 23, 2002 8:00 am Secretary of State DOCUMENT # **744898** 1. Entity Name 05-23-2002 90099 049 \*\*\*\*61.25 JAMESTOWN CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address C/O ALL.FLORIDA REALTY 8470-12ST NO 11270, 4TH-ST N # 216 ST PETE FL 33702 SAINT PETERSBURG FL 33716 2. Principal Place of Business 3. Mailing Address 8470 127H ST. 8470 IZTH ST. NO . Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2043073 T. PETERSBURG Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired 33702 Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PROPERT MANAGENENT ALL FLORIDA REALTY SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 11270 4TH ST. N. #216 SW 103 CHEVELAND AVE ST PETERSBURG FL 33716 Zip Code 3*3770* 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITI F (9/01) ☐ Addition ☐ Change LYNCH, THERESA NAME 1303-B 83RD AVE NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETERSBURG FL 33702 CITY-ST-ZIP TITLE D Delete BORNA HOWER Brang 8523-DIOTH ST. NO. TITLE ☐ Addition CAMPBELL, LENNY NAME NAME STREET ADDRESS 1162 A 84TH TERR N STREET ADDRESS ST. PETENSBURG FL 33702 CITY-ST-ZIP ST. PETERSBURG FL 33702 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition MARKS, PATRICIA NAME NAME 1295 D 85 AVE N-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33702 CITY-ST-7IP D-JOANNE CORTIS 8565 - C 12TH WAY NO ST. PETERSBURG FL Addition MCKENZIE, ANN 8585D-12WAY NO STREET ADDRESS STREET ADDRESS 33702 CITY-ST-ZIP ST PETE FL 33702 CITY-ST-ZIP TITLE □ Delete Change ☐ Addition GIBB, JOHN NAME NAME STREET ADDRESS 1143 A 85TH TERR N STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33702 CITY-\$T-ZIP D-MARIE CORCELLA Change 1162-D 84 TH TERPACE NO. Delete TITLE LOGEE, BILL NAME NAME STREET ADDRESS 1123 B 85 TERR N STREET ADDRESS ST. PETERSBURG FL 33702 CITY-ST-ZIP SAINT PETERSBURG FL 33702 CITY-ST-ZIP I hereby certify that the information supplied with this filling 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: