

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Mar 10, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N00000006954**

1. Entity Name

JUBILATION COMMUNITY ASSOCIATION, INC.



Principal Place of Business

1840 BOY SCOUT DRIVE  
SUITE B  
FORT MYERS FL 33907

Mailing Address

1840 BOY SCOUT DRIVE  
SUITE B  
FORT MYERS FL 33907



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-1084657

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, DIANA L  
1840 BOY SCOUT DRIVE  
SUITE B  
FORT MYERS FL 33907

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Diana Moore*

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

(NOTE: Registered Agent signature area used when reappointing)

*March 6, 2008*

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
P/D  
CARMICHAEL, THOMAS  
1150 SERENITY WAY  
IMMOKALEE FL 34142 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
V/D  
HUDSON, BOBBY  
1276 FRIENDSHIP WAY  
IMMOKALEE FL 34142 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
S/D  
LOPEZ, CARMELITA  
1115 SERENITY WAY  
IMMOKALEE FL 34142 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
T/D  
PEREZ, STEPHEN  
1141 SERENITY WAY  
IMMOKALEE FL 34142 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
D  
KENNEDY, JERRY  
1170 HARVEST DR  
IMMOKALEE FL 34142 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
D  
DESILUS, NICOLAS  
1110 SERENITY WAY  
IMMOKALEE FL 34142 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☐ Change ☐ Addition  
U000000854155  
03/26/08-80100-004 61.25

TITLE  
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CITY- ST- ZIP  
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TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Carmelita Lopez*

3/6/2008