2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004556

FILED May 01, 2009 Secretary of State

Entity Name: JAMAICA CRICKET ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 6710 SW 26 CT MIRAMAR, FL 33023 **Current Mailing Address: New Mailing Address:** 6710 SW 26 CT PO BOX 490704 FT LAUDERDALE, FL 33349 MIRAMAR, FL 33023 FEI Number: 56-2507928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRIS, TREVOR P SMITH, PHILMORE M 5015 W PARK RD 5316 NW 18 ST #4 LAUDERHILL, FL 33313 HOLLYWOOD, FL 33021 US US 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: PHILMORE SMITH 05/01/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GREEN, STAN Name: Name: 6710 SW 26 CT Address: Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: Title: () Delete Title: (X) Change () Addition CHAMBERS, TREVOR Name: HARRIS, TREVOR P Name: Address: 5316 NW 18 ST #4 Address: 16401 NW 37AVE City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: MIAMI GARDENS, FL 33054 Title: () Delete Title: (X) Change () Addition SMITH, PHILMORE Name: SMITH, PHILMORE Name: 5014 W PARK RD 501 5W PARK RD Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021 Title: () Delete Title: (X) Change () Addition Name: TAYLOR, SILVAN Name: BENNETT, MIKEAL 7929 EMBASSY BLVD Address: Address: 70 NE 185 TER City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: NORTH MIAMI BEACH, FL 33169 Title: Title: (X) Delete () Change () Addition JONES, ALVIN Name: Name: 7833 OLEANS STREET Address: Address: City-St-Zip: MIRAMAR, FL 33023 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: PHILMORE SMITH D 05/01/2009