

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011124

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** JAMAICA OUTREACH PROGRAM, INC.

**Current Principal Place of Business:**

625 111TH AVENUE NORTH  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 110581  
NAPLES, FL 341081929

**New Mailing Address:**

**FEI Number:** 20-8041251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

R&A AGENTS, INC.  
850 PARK SHORE DRIVE  
NAPLES, FL 34103 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: PD  
Name: GAGNIER, JOSEPH  
Address: 1213 IMPERIAL DR  
City-St-Zip: NAPLES, FL 34110

Title: STD  
Name: STAMANT, JEANNE  
Address: 2223 IMPERIAL GOLF COURSE BLVD  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: VANBUSKIRK, RICHARD  
Address: 10511 SEVILLA DR #201  
City-St-Zip: FT. MYERS, FL 33913

Title: CD  
Name: KERNS, ALBERT  
Address: 3411 ARLETTE DR  
City-St-Zip: NAPLES, FL 34109

Title: D  
Name: OCONNELL, WILLIAM  
Address: 8315 EXCALIBUR CIR P-11  
City-St-Zip: NAPLES, FL 34110

Title: VD  
Name: OUSTRICH, JOHN  
Address: 5115 CEDAR SPRINGS DR #3101  
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: JEANNE STAMANT

SECR

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date