

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 08, 2010
Secretary of State

DOCUMENT# N11111

Entity Name: JAMAICA UNITED RELIEF ASSOCIATION, INC.**Current Principal Place of Business:**5100 JEFFERSON STREET
HOLLYWOOD, FL 33021 US**New Principal Place of Business:****Current Mailing Address:**5100 JEFFERSON STREET
HOLLYWOOD, FL 33021 US**New Mailing Address:****FEI Number:** 59-2583843**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SEWELL, MICHAEL, W.
5100 JEFFERSON STREET
HOLLYWOOD, FL 33021 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: P
Name: FALLOON-REID, OLIVER M
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP
Name: BURNS, ELIZABETH
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: S
Name: WILLIAMS, LURLINE
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: T
Name: SEWELL, MICHAEL W
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: SCOTT, JANICE
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: MCGOWAN, VONNIE
Address: 5100 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: MICHAEL W. SEWELL

T

11/08/2010

Electronic Signature of Signing Officer or Director

Date