

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23571

FILED
Jan 15, 2009
Secretary of State

Entity Name: FLORIDA ORGANIZATION OF JAMAICANS, INC.

Current Principal Place of Business:

15037 SW 141 TR
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

15037 SW 141 TR
MIAMI, FL 33196

New Mailing Address:

FEI Number: 65-0079937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANCROFT, NORMA
15037 SW 141 TR
MIAMI, FL 33196 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: VD () Delete
Name: BELL, ARTHUR,
Address: 10275 S.W. 141ST CT.
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: BANCROFT, NORMA,
Address: 15037 SW 141 TERR
City-St-Zip: MIAMI, FL 33196

Title: SD (X) Delete
Name: BALL, MYRTLE,
Address: 6100 SOUTHWEST 137 AVE.
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: FOSTER, NORMA,
Address: 15207 SW 46 LANE
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: NORMA BANCROFT

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date