

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90076 030 ****61.25

DOCUMENT # N92000000503

1. Entity Name
JAMAICAN LAKE OWNERS ASSOCIATION, INC.



Principal Place of Business
**22811 PCB PKWY
#46
PANAMA CITY BEACH, FL 32413 US**

Mailing Address
**22811 PCB PKWY
#46
PANAMA CITY BEACH, FL 32413 US**



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

01052008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3160438

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

**JAMACIAN LAKE OWNERS ASSOC., INCE
22811 PANAMA CITY BCH PKWY
PANAMA CITY BEACH, FL 32413**

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing 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

**DT
EVERETT, PAUL
22811 PCB PKWY #14
PANAMA CITY BEACH, FL 32413**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DRS
BURHAM, SANDRA
3095 HIGHWAY 231 SOUTH
ARAB, AL 35016**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DVP
SEAY, JACK
2809 W 15TH STREET
PANAMA CITY, FL 32405**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DP
DURHAM, WILLIE
3045 HIGHWAY 231 SOUTH
ARAB, AL 35016**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
SARMIENTO, SALVADORE
111 OLD VIRGINIA CIRCLE
JONESBORO, GA 30236**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
BRIGMAN, BOBBIE
22811 PANAMA CITY BCH. PKWY #26
PANAMA CITY BEACH, FL 32413**

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
KNOFLACH, JOSEF
22811 Panama City Bch PKWY #24
Panama City Bch, FL 32413**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DVP
Sarmiento, Salvadore
111 Old Virginia Circle
Jonesboro, Ga. 30236**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DS
Brigman, Bobbie
22811 Panama City Bch PKWY #26
Panama City Bch, FL 32413**

☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *DT Paul Everett*

1-7-08 *850-233-6064*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PAUL EVERETT