2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001767

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

N. MIAMI, FL 33162

MILLS, DUDLEY

563 NW 87 LANE

() Delete

CORAL SPRING, FL 33071

FILED Feb 27, 2009 Secretary of State

Entity Name: THE JAMAICA EX-POLICE ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 3351 NW 40 STREET 2700 SOMERSET DRIVE # Y210 LAUDERDALE LAKES, FL 33309 LAUDERDALE LAKES, FL 33311 **Current Mailing Address: New Mailing Address:** P O BOX 8605 FT LAUDERDALE, FL 33310 FEI Number: 65-0765764 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUNN, ALPHONSO JOHNSON-BAXTER, MONICA E 3351 NW 40 STREET 2700 SOMERSET DRIVE # Y210 LAUDERDALE LAKES, FL 33309 US US LAUDERDALE LAKES, FL 33311 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: MONICA E JOHNSON-BAXTER 02/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Change () Addition () Delete JARRETT-MILLER, AVIS Name: Name: 4640 NW 43 COURT Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33319 City-St-Zip: Title: () Delete Title: (X) Change () Addition SOMERS, MICHAEL Name: CLARKE, LENORD Name: Address: 8813 NW 3 COURT Address: 4831 NW 19 COURT City-St-Zip: CORAL SPRING, FL 33071 City-St-Zip: LAUDERHILL, FL 33313 Title: SEC () Delete Title: SEC (X) Change () Addition DUNN, ALPHONSO WALTERS, NICKEISHA Name: Name: 3351 NW 40 STREET Address: Address: 4800 NW 1 CT City-St-Zip: LAUDERDALE LAKES, FL 33309 City-St-Zip: PLANTATION, FL 33317 Title: **TRES** () Delete Title: () Change () Addition Name: JOHNSON, MONICA Name: 2700 SOMERSET DRIVE # Y210 Address: Address: City-St-Zip: MIRAMAR, FL 33311 City-St-Zip: Title: A/TR () Delete Title: () Change () Addition BRYAN, SAMUEL Name: Name: 1040 NE 155 STREET Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MONICA E BAXTER-JOHNSON TRES 02/27/2009

(X) Change () Addition

BENNETT, ROY

3408 SW 63 WAY

MIRRAMAR, FL 33023