

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734572

Entity Name: JAMAICA ROYALE TOWER II ASSOCIATION, INC.

Current Principal Place of Business:

5830 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

Current Mailing Address:

5830 MIDNIGHT PASS ROAD
SARASOTA, FL 34242 US

FEI Number: 59-1659085

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARDS, KEVIN
BECKER & POLIAKOFF
1819 MAIN ST SUITE 905
SARASOTA, FL 34236 US

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: KEVIN EDWARDS

01/25/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name GELETKA, TODD
Address 5830 MIDNIGHT PASS ROAD
#205
City-State-Zip: SARASOTA FL 34242

Title TREASURER
Name WEINTRAUB, PAUL
Address 5830 MIDNIGHT PASS ROAD
#504
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name OVERDORF, DAVID
Address 5830 MIDNIGHT PASS ROAD
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name CARMICHAEL, JACK
Address 5830 MIDNIGHT PASS ROAD
#206
City-State-Zip: SARASOTA FL 34242

Title PRESIDENT
Name KLOSNER, GREGORY
Address P O BOX 876
City-State-Zip: NISSWA MN 56466

Title SECRETARY
Name SCHMID, AMY
Address 5830 MIDNIGHT PASS ROAD
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name WIERDSMA, DAVID
Address 5830 MIDNIGHT PASS ROAD
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name OCCHINO, LEE
Address 5830 MIDNIGHT PASS ROAD
#306
City-State-Zip: SARASOTA FL 34242

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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: TODD GELETKA

PRESIDENT

01/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name OCCHINO, ANTHONY
Address 5830 MIDNIGHT PASS ROAD
 #306
City-State-Zip: SARASOTA FL 34242