

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 754927

**Entity Name:** JAMESTOWN PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

909 SE CENTRAL PARKWAY  
STUART, FL 34994

**Current Mailing Address:**

909 SE CENTRAL PARKWAY  
STUART, FL 34994 US

**FEI Number: 59-2045821**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROSS, DEBORAH L  
789 SOUTH FEDERAL HWY  
STE 101  
STUART, FL 34994 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title VP  
Name BAUTE, BARBARA  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title PRESIDENT  
Name KIAH, MARY K  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title TREASURER  
Name CA POMACCIO, JAMES  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name PETRILLO, BART  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title SECRETARY  
Name CALVANESE, MICHELLE  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name DORANTES, FRAN  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name MAUREEN, SULLIVAN  
Address 909 SE CENTRAL PARKWAY  
City-State-Zip: STUART FL 34994

*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: MARY KIAH**

**PRESIDENT**

**09/28/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date