

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008688

Entity Name: DOWNTOWN JEWEL NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**432 SOUTH J STREET
LAKE WORTH, FL 33460**Current Mailing Address:**432 SOUTH J STREET
LAKE WORTH, FL 33460**FEI Number:** 01-0970699**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WESTON, CASSANDRA
432 S J STREET
LAKE WORTH, FL 33460 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 TREASURER
Name WESTON, CASSANDRA
Address 432 SOUTH J STREET
City-State-Zip: LAKE WORTH FL 33460

Title SECRETARY
Name VANNIER, GREG
Address 120 SOUTH J STREET
City-State-Zip: LAKE WORTH FL 33460

Title VP
Name SAVAGE, DAVID
Address 432 SOUTH J STREET
City-State-Zip: LAKE WORTH FL 33460

Title PRESIDENT
Name WILSON, DAVID
Address 427 SOUTH J STREET
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name DELANEY, TJ
Address 106 S M STREET
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name EVANS, PAUL
Address 217 S M STREET
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name FAUST, JON
Address 416 SOUTH M STREET
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name GODDARD, NANCY
Address 404 SOUTH M STREET
City-State-Zip: LAKE WORTH FL 33460

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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: CASSANDRA C WESTON**TREASURER****02/12/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LIN, ALLEN
Address	118 S M STREET
City-State-Zip:	LAKE WORTH FL 33460