

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 131530

Entity Name: JAMCO, INC.

**Current Principal Place of Business:**

1615 CLARE AVE  
W PALM BEACH, FL 33401

**Current Mailing Address:**

PO BOX 3768  
W PALM BEACH, FL 33402 US

FEI Number: 59-0370790

Certificate of Status Desired: Yes

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

MURPHY, JOHN E  
1615 CLARE AVE  
WEST PALM BEACH, FL 33401 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 TSD  
Name MARTINELLI, VICTOR  
Address 1436 STONEHAVEN ESTATES DR  
City-State-Zip: WEST PALM BEACH FL 33411

Title VD  
Name MURPHY, JOHN E  
Address 1700 N. LAKESIDE DR  
City-State-Zip: LAKE WORTH FL 33460

Title PD  
Name MURPHY, MARTIN ESR  
Address 1615 CLARE AVENUE  
City-State-Zip: WEST PALM BEACH FL 33401

Title DAT  
Name LETTENMAIER, LISA  
Address 8689 OLDHAM WAY  
City-State-Zip: WEST PALM BEACH FL 33412

Title DVP  
Name MURPHY, MARTIN EJER  
Address 1615 CLARE AVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title D  
Name MENDIA, JOSEPH  
Address 1615 CLARE AVE  
City-State-Zip: WEST PALM BEACH FL 33401

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: VICTOR MARTINELLI

TREASURER

01/31/2014

Electronic Signature of Signing Officer/Director Detail

Date