

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 15, 2019
Secretary of State
2082979630CC

Entity Name: JUMP STREET MANAGEMENT, INC.

Current Principal Place of Business:

8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446

Current Mailing Address:

8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446

FEI Number: 56-2294138

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHRISTENSEN, ROBERT R
8015 S SUNCOAST BLVD
HOMOSASSA, FL 34446 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 TATE, LARRY
Address 11 BYRSONIMA CT. WEST
City-State-Zip: HOMOSASSA FL 34446

Title PRESIDENT
Name AUSTIN, TERRY V
Address 3831 N CATBIRD PT
City-State-Zip: CRYSTAL RIVER FL 34428

Title S
Name JACOBY, JAMES J
Address 481 N.W. 14TH PLACE
City-State-Zip: CRYSTAL RIVER FL 34428

Title T
Name CHRISTENSEN, ROBERT R
Address 4 SHORTLEAF COURT W.
City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR
Name MAUGHAN, NELSON W SR.
Address 44 CYPRESS BLVD W
City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR
Name PONTICOS, STEPHAN E
Address 7 BYRSONIMA CT W
City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR
Name BARTLE, SHERYL L
Address 5515 N ROSEDALE CIRCLE
City-State-Zip: BEVERLY HILLS FL 34465

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: ROBERT R CHRISTENSEN

TREASURER

02/15/2019

Electronic Signature of Signing Officer/Director Detail

Date