

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 734709

1. Entity Name

JUPITER OCEAN AND RACQUET CLUB CONDOMINIUM ASSOC

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90087 006 \*\*\*\*61.25

Principal Place of Business  
1605 U.S. HIGHWAY 1  
P.O. BOX 3190  
JUPITER FL 33477  
US

Mailing Address  
1605 U.S. HIGHWAY 1  
P.O. BOX 3190  
JUPITER FL 33477-7213  
US

2. Principal Place of Business  
1695 U.S Hwy. 1  
Suite, Apt. #, etc.

3. Mailing Address  
1605 U.S. Hwy. 1  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
Jupiter, FL  
Zip  
33477  
Country  
USA

City & State  
Jupiter, FL  
Zip  
33477  
Country  
USA

4. FEI Number  
59-1754571  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ST. JOHN, DAVID  
500 AUSTRALIAN AVE S  
STE 600  
W PALM BCH FL 33401

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	FELDMAN, ARTHUR	1605 S. US HWY.1	JUPITER FL	<input type="checkbox"/>
VD	DAVIS, REBECCA	1605 S US 1	JUPITER FL	<input checked="" type="checkbox"/>
SD	MASTROIANNI, BARBARA	1605 S US 1	JUPITER, FL 0	<input checked="" type="checkbox"/>
TD	FLYNN, FRANK	S. US HWY. 1	JUPITER FL 33477	<input type="checkbox"/>
T	CASSIDY, VINCENT	1605 US HWY 1	JUPITER FL	<input checked="" type="checkbox"/>
D	DEVALUE, RODGER	1605 S US 1	JUPITER FL	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
Director	Davis, Rebecca	1605 U.S. Hwy.1 Midrise 1-102	Jupiter, FL 33477	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	Forrestel, Ann	1605 U.S. Hwy.1 Midrise 3-502	Jupiter, FL 33477	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VP	Flynn, Frank	1605 U.S. Hwy.1 Midrise 3-304		<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	Fagan, Marion	1605 U.S. Hwy.1 Tennis Villa 6-101	Jupiter, FL 33477	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	Rodger DeValue	1605 U.S. Hwy.1 Searise F-201	Jupiter, FL 33477	<input checked="" type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)