
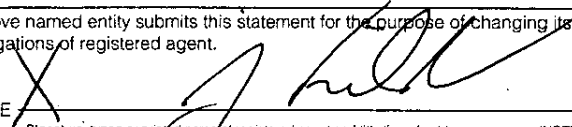
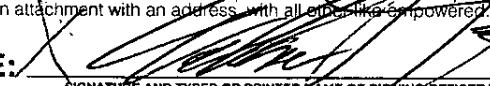


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90289 045 \*\*\*\*61.25

<b>DOCUMENT # 742255</b> 1. Entity Name <b>JUPITER PLANTATION HOMEOWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>825 CENTER STREET #58 JUPITER FL 33458 US</b>		Mailing Address <b>825 CENTER STREET #58 JUPITER FL 33458 US</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>59-1891960</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>MEROLA, JAMES R</b> <b>11380 PROSPERITY FARMS ROAD</b> <b>STE 204</b> <b>PALM BEACH GARDENS FL 33410</b>		Name <b>Gary Fields</b> Street Address (P.O. Box Number is Not Acceptable) <b>700 PGA Blvd Suite 700</b> City <b>PBG</b> FL Zip Code <b>33410</b>	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE <b>4/13/04</b>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>Make Check Payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<b>SR PID</b>	TITLE	<b>PRESIDENT ID</b>
NAME	<b>MARYLOU, ALLISON</b>	NAME	<b>LARRY CARTER</b>
STREET ADDRESS	<b>825 CENTER ST #19C</b>	STREET ADDRESS	<b>825 CENTER ST 20C</b>
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	CITY-ST-ZIP	<b>JUPITER, FL 33458</b>
TITLE	<b>VPD</b>	TITLE	<b>SAME</b>
NAME	<b>EMERSON, LINDA</b>	NAME	<b>SAME</b>
STREET ADDRESS	<b>825 CENTER ST #26A</b>	STREET ADDRESS	<b>SAME</b>
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	CITY-ST-ZIP	<b>SAME</b>
TITLE	<b>D</b>	TITLE	<b>SECRETARY ID</b>
NAME	<b>GILBERT, DIRK</b>	NAME	<b>WALLY ABEL</b>
STREET ADDRESS	<b>825 CENTER ST #34B</b>	STREET ADDRESS	<b>825 CENTER ST 55D</b>
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	CITY-ST-ZIP	<b>JUPITER, FL 33458</b>
TITLE	<b>PD-SELY</b>	TITLE	<b>T/D</b>
NAME	<b>SLATTERY, JOHN</b>	NAME	<b>WALLY ABEL</b>
STREET ADDRESS	<b>825 CTR ST, #460</b>	STREET ADDRESS	<b>825 CENTER ST 55D</b>
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	CITY-ST-ZIP	<b>JUPITER, FL 33458</b>
TITLE	<b>ID</b>	TITLE	<b>T/D</b>
NAME	<b>LEWANDOWSKI, JERRY</b>	NAME	<b>WALLY ABEL</b>
STREET ADDRESS	<b>825 CENTER ST #354A</b>	STREET ADDRESS	<b>825 CENTER ST 55D</b>
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	CITY-ST-ZIP	<b>JUPITER, FL 33458</b>
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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 officers empowered.			
SIGNATURE: 		DATE <b>3/22/04</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	
		Daytime Phone #	