

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

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90041 031 ****61.25

DOCUMENT # 758098

1. Entity Name

JUPITER HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

1420 OCEAN WAY
#33-A
JUPITER FL 33477

Mailing Address

1420 OCEAN WAY
#33-A
JUPITER FL 33477

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-2264460

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FIELDS, GARY
ADMIRALTY TOWERS SUITE 700
4400 PGA BLVD.
PALM BEACH GARDENS FL 33401

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	WALSH, JOHN	<input type="checkbox"/> Delete
NAME		1420 OCEAN WAY 14 A	
STREET ADDRESS		JUPITER FL 33477	
CITY-ST-ZIP			
TITLE	PD	BELITSKY, BERNIE	<input checked="" type="checkbox"/> Delete
NAME		1420 OCEAN WAY #23C	
STREET ADDRESS		JUPITER FL 33477	
CITY-ST-ZIP			
TITLE	VPD	O'CONNOR, SHAWN	<input checked="" type="checkbox"/> Delete
NAME		1420 OCEAN WAY 7B	
STREET ADDRESS		JUPITER FL 33477	
CITY-ST-ZIP			
TITLE	T	TISHLER, JACK	<input checked="" type="checkbox"/> Delete
NAME		1420 OCEAN WAY 9C	
STREET ADDRESS		JUPITER FL 33477	
CITY-ST-ZIP			
TITLE	S	TRAINOR, HELEN	<input checked="" type="checkbox"/> Delete
NAME		1420 OCEAN WAY, #17D	
STREET ADDRESS		JUPITER FL 33477	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE	P	Walsh, John	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1420 Ocean Way 14-A	
STREET ADDRESS		Jupiter, FL 33477	
CITY-ST-ZIP			
TITLE	VP	Richmond, Carol	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1420 Ocean Way 13-B	
STREET ADDRESS		Jupiter, FL 33477	
CITY-ST-ZIP			
TITLE	T	Rotondo, Grace	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1420 Ocean Way 27-C	
STREET ADDRESS		Jupiter, FL 33477	
CITY-ST-ZIP			
TITLE	S	Fitzgerald, Margaret	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1420 Ocean Way #26-C	
STREET ADDRESS		Jupiter, FL 33477	
CITY-ST-ZIP			
TITLE	D	Reichardt, James	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1420 Ocean Way 12-B	
STREET ADDRESS		Jupiter, FL 33477	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
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 like empowered.

SIGNATURE:

John G. Walsh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/04

Date

Daytime Phone #