

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # 766549

1. Entity Name
**JUPITER REEF CLUB CONDOMINIUM OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**1600 S A1A
JUPITER, FL 33477-8441 US**

Mailing Address
**1600 S A1A
JUPITER, FL 33477-8441 US**



04252006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2699845

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FIELDS, GARY D
4400 PGA BLVD., STE. 700
PALM BEACH GARDENS, FL 33410**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**000000540308
05/10/06-80014-002 61.25**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRADLEY, STEPHEN W. 280 W CANTAN AVENUE #430 WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORLEY, RICHARD 815 W KALMIA DR LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEUZIL, RETH 300 N A1A N105 JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEFED, NUNZIO 5811 LONGWOOD CT JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOYKIN, JOHN 6 ALFORD CT. PALM BEACH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINGREN, ROBERT 1605 US HWY 1 SOUTH SEARISE A-401 JORC JUPITER, FL 33477

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Nunzio Defed*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/06 561-747-7788
Daytime Phone #