

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90168 025 \*\*\*\*61.25

**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

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 **59-2699845**

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

**ST. JOHN, CORE, FLORE, & LEMME, PA**  
**500 AUSTRALIAN AVE. SOUTH**  
**SUITE 600**  
**WEST PALM BEACH 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**

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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>BRADLEY, STEPHEN W.</b><br><b>280 W CANTAN AVENUE #430</b><br><b>WINTER PARK FL</b>                     | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VP</b><br><b>STORM, JANET</b><br><b>P.O. BOX 47461</b><br><b>INDIANAPOLIS TN 46247</b>                              | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>NEUZIL, RETH</b><br><b>300 N A1A N105</b><br><b>JUPITER FL 33477</b>                                    | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D Treasurer</b><br><b>WHITE, JOSEPH</b><br><b>15 TOURNAMENT BLVD</b><br><b>WEST PALM BEACH FL 33418</b>             | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br><b>PRYCE, BETTY N</b><br><b>9702 SE LITTLE CLUB WAY SOUTH</b><br><b>TEQUESTA FL 33469</b>                  | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>President</b><br><b>LINGREN, ROBERT</b><br><b>1605 US HWY 1 SOUTH SEARISE A-401 JORC</b><br><b>JUPITER FL 33477</b> | <input type="checkbox"/> Delete            |

|                                                |                                                                                                     |                                                                                         |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Secretary</b><br><b>PETE STACHNUS</b><br><b>152 Beach Summit CT</b><br><b>JUPITER, FL 33477</b>  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VP</b><br><b>RICHARD MORLEY</b><br><b>815 W. KALMIA DR</b><br><b>LAKE PARK, FL 33403</b>         | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Director</b><br><b>John Boykin</b><br><b>6 Alford Court</b><br><b>Palm Bch Gardens, FL 33418</b> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |

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* **Joseph H White 4-29-03**

CR2E037 (10/02)