


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 26, 2008 8:00 am**  
**Secretary of State**

03-26-2008 90018 040 \*\*\*\*61.25

<b>DOCUMENT # N05149</b>			
1. Entity Name <b>JUNO OCEAN WALK CONDOMINIUM ASSOCIATION, INC.</b>			
Principal Place of Business <b>900 JUNO OCEAN WALK JUNO BEACH, FL 33408 US</b>		Mailing Address <b>900 JUNO OCEAN WALK JUNO BEACH, FL 33408 US</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>DICKER, EDWARD ESQ 1818 AUSTRALIAN WAY SOUTH STE 400 WEST PALM BEACH, FL 33409</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b>	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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>Filing Fee is \$61.25 Due by May 1, 2008</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	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	L'ABBE, AILEEN	NAME	
STREET ADDRESS	900 JUNO OCEAN WALK #A86	STREET ADDRESS	
CITY-ST-ZIP	JUNO BCH, FL 33408	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOOVER, GLENN A	NAME	<b>Rick Knapp</b>
STREET ADDRESS	P.O. BOX 808	STREET ADDRESS	<b>900 Juno Ocean Walk, A67</b>
CITY-ST-ZIP	MCPHERSON, KS 67460	CITY-ST-ZIP	<b>Juno Beach, FL 33408</b>
TITLE	TD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARPER, WILLIAM R	NAME	<b>JoAnne Cassels - Lander</b>
STREET ADDRESS	900 JUNO OCEAN WALK #6	STREET ADDRESS	<b>900 Juno Ocean Walk, A21</b>
CITY-ST-ZIP	JUNO BEACH, FL 33408	CITY-ST-ZIP	<b>Juno Beach, FL 33408</b>
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CRANICK, FRED	NAME	<b>Barbara Frank</b>
STREET ADDRESS	900 JUNO OCEAN WALK E-14	STREET ADDRESS	<b>900 Juno Ocean Walk, C31</b>
CITY-ST-ZIP	JUNO BEACH, FL 33408	CITY-ST-ZIP	<b>Juno Beach, FL 33408</b>
TITLE	P <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KING, JOSEPH	NAME	<b>Peter Conn</b>
STREET ADDRESS	900 JUNO OCEAN WALK	STREET ADDRESS	<b>900 Juno Ocean Walk, E20</b>
CITY-ST-ZIP	JUNO BEACH, FL 33408	CITY-ST-ZIP	<b>Juno Beach, FL 33408</b>
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLANCHETTE, CLAUDE	NAME	<b>Brian Grover</b>
STREET ADDRESS	900 JUNO OCEAN WALK	STREET ADDRESS	<b>900 Juno Ocean Walk</b>
CITY-ST-ZIP	JUNO BEACH, FL 33408	CITY-ST-ZIP	<b>Juno Beach, FL 33408</b>
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: <u><i>JoAnne Cassels-Lander</i></u>		Date: <u>3/24/08</u> (561) 622-7500	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

ATTACHMENT  
40051761

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ANNUAL REPORT

ADDITIONAL OFFICERS AND DIRECTORS

DOCUMENT # N05149

PLEASE ADD THE FOLLOWING OFFICER / DIRECTOR

VPD  
BILL GARDNER  
900 JUNO OCEAN WALK, C20  
JUNO BEACH, FL 33408

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