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

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JUPITER/TEQUESTA SUNRISE ROTARY CLUB ENDOWMENT, INC.						O3 SEP -5 PMIZ: 41 SCUNETARY OF STATE TALLAHASSEE, FLORIDA					
Principal Plai 801 MAPLEWO SUITE 22A JUPITER FL 33		Mailing Address 801 MAPLEWOOD DRIVE SUITE 22A JUPITER FL 33458-8821	801 MAPLEWOOD DRIVE SUITE 22A								
Principal Place of Business Address Mailing Address		3. Mailing Address		· -							
Sulta, Apt. #, etc.		Suite, Apt. #, etc.			-	CHECK HERE IF MAKING CHANGES					
City & Sta	te	City & State			4. FEI	Number NO	T APPLICAT	LE	-	oplied For ot Applicable	a
Zip	Country	Zip	Col	Intry		tificate of Stat		L F	8.75 Ad ee Require		
	6. Name and Address of Curren	Registered Agent		Name a		ne and Addre	ss of New Regi	stered Ag	ent		4
BERROCAL, CARLOS J 801 MAPLEWOOD DRIVE SUITE 22A JUPITER FL 33458-8821			Street Addr	CHARD ess (P.O. Box VV) HE	FP16BA Number is No RowW001	t Acceptable)			· · · · · · · · · · · · · · · · · · ·	-	
ÇOI II EI I	12 33 144 4021			City Ve	3T PARA	REACH		FL	Zip Cod	e • - /	
SIGNATURE	FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$	and title if applicable. (NOT	mpaign F	d Agent algnature re		May Be	Make Florida	DATE Check I Departm	Payable		
10.	OFFICERS AND DI	RECTORS	11.		ADDITION	S/CHANGES	TO OFFICERS	AND DIRE	CTORS IN	10	┧_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ID NICKERSON, DAVID K JR. 1001 N. U.S. HIGHWAY ONE, SU JUPITER FL 33477	□ Delete JTE 304		- 1			,	[Change	☐ Addition	CR2E037 (4/03)
CITY-ST-ZIP	D WOOD, LISA G 316 4TH STREET JUPITER FL 33458	☐ Delete		1] Change	Addition	18
NAME STREET ADDRESS CITY-ST-ZIP	TAMBOR, RICHARD 847 DONALD ROSS ROAD JUNO BEACH FL 33408	→ Delste, →		Tr.		(The	<u></u>	Change ,	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	D FRIEDKIN, RICHARD 10221 HERONWOOD LN WEST PALM BEACH FL 33412	☐ Delete	4	4			6] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	-		,			E] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		; Delete	CITY-	T ADDRESS ST-ZIP					Change	Addition	
12. I hereby o	certify that the information supplied with	this filing does not qualify for	the exen	nption stated in	1 Section 119.	07(3)(i), Florid	a Statutes. I furt	her certify	that the in	formation	t

Thereby 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.

GNATURE:

| SIGNATURE AND TYPED ORPHINGED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Dayling Phone #

SIGNATURE: