

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State
03-22-2001 90045 012 ****61.25

DOCUMENT # N38596

1. Entity Name

CYPRESS COVE OF JUPITER HOMEOWNERS ASSOCIATION,

Principal Place of Business

Mailing Address

725 N A1A
C-110
JUPITER FL 33477
US

100-8-03-1 725 NA1A
P-133 C-110
JUPITER FL 33477
US

2. Principal Place of Business

3. Mailing Address

725 NA1A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

C110

City & State

City & State

JUPITER FL

Zip

Country

Zip

Country

33477 USA

4. FEI Number

65-0228334

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE, JAY STEVEN
LEVINE, FRANK & EDGAR PA.
3300 PGA BLVD, SUITE 500
PALM BEACH GARDENS FL 33410

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.

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SCHWARTZ, ARTHUR
STREET ADDRESS 6809 CYPRESS COVE CIRCLE
CITY-ST-ZIP JUPITER FL 33458 ☒ Delete

TITLE RD Jo
NAME John Madey
STREET ADDRESS 6755 Cypress Cove Circle
CITY-ST-ZIP Jupiter, FL 33458 ☐ Change ☒ Addition

TITLE D
NAME LICHTMAN, DAVID
STREET ADDRESS 19183 TAMARA LANE
CITY-ST-ZIP JUPITER FL 33458 ☒ Delete

TITLE BT
NAME Denise Mc Naboe
STREET ADDRESS 6846 Cypress Cove Circle
CITY-ST-ZIP Jupiter FL 33458 ☐ Change ☒ Addition

TITLE D
NAME RICH, JIM
STREET ADDRESS 19177 TAMARA LANE
CITY-ST-ZIP JUPITER FL 33458 ☒ Delete

TITLE DS
NAME Norma Kaminsky
STREET ADDRESS 6905 Cypress Cove Circle
CITY-ST-ZIP Jupiter FL 33458 ☐ Change ☒ Addition

TITLE DS
NAME RICH, MARILYN
STREET ADDRESS 19177 TRMALA LAN
CITY-ST-ZIP JUPITER FL 33458 ☐ Delete

TITLE DVA
NAME Rich, Marilyn
STREET ADDRESS 19177 Tamara Lane
CITY-ST-ZIP Jupiter FL 33458 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Madey

Date

Daytime Phone #

CR2E037 (10/00)