

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98385

1. Entity Name

PRIORITY INVESTMENTS OF JUPITER, INC.

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90033 048 ***150.00

Principal Place of Business

5600 CENTER STREET
STE 1
JUPITER FL 33458
US

Mailing Address

5600 CENTER STREET
STE 1
JUPITER FL 33458
US

2. Principal Place of Business

560 Center Street

Suite, Apt. #, etc.

Suite 1

City & State

Jupiter, FL

Zip

33458

Country

U.S.A.

3. Mailing Address

560 Center Street

Suite, Apt. #, etc.

Suite 1

City & State

Jupiter, FL

Zip

33458

Country

U.S.A.

00030953



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0071772

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOOGE, HOWARD E.
P.O. BOX 66
401 E. OSCEOLA STREET
STUART FL 34994

7. Name and Address of New Registered Agent

Name Don Anderson

Street Address (P.O. Box Number is Not Acceptable)

560 Center Street, Suite 1

City Jupiter

FL

Zip Code

33458

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)

3/30/01

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DV
NAME BARNES, LISA ☒ Delete
STREET ADDRESS 2581 JUPITER PARK DRIVE E13
CITY-ST-ZIP JUPITER FL

TITLE P
NAME ANDERSON, DON ☐ Delete
STREET ADDRESS 560 CENTER STREET STE 1
CITY-ST-ZIP JUPITER FL 33458

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Don Anderson, President

3/30/01

Date

(561) 744-9977

Daytime Phone #

CR2E034 (10/00)