

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2001 8:00 am
Secretary of State

06-04-2001 90009 008 ****61.25

DOCUMENT # N97000004954

1. Entity Name

JUPITER-TEQUESTA-JUNO BEACH CHAMBER OF COMMERCE

Principal Place of Business

Mailing Address

800 NORTH US HWY ONE
 JUPITER FL 33477

800 NORTH US HWY ONE
 JUPITER FL 33477

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

65-0784996

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

MURTAUGH, LOUISE
800 NORTH US HWY ONE
JUPITER FL 33477

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.

(NOT 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 **D** ☐ Delete
 NAME **HEARD, BRUCE**
 STREET ADDRESS **1210 S DIXIE HWY**
 CITY-ST-ZIP **JUPITER FL 33458**

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

TITLE **DV** ☒ Delete
 NAME **CATHEY, TOM**
 STREET ADDRESS **1300 MOHAWK ST.**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☒ Addition
 NAME **DIRECTOR**
 STREET ADDRESS **KRISTEN MURTAUGH**
 CITY-ST-ZIP **5353 PARKSIDE DRIVE**
Jupiter, FL 33458

TITLE **D** ☐ Delete
 NAME **MURPHY, WILLIAM**
 STREET ADDRESS **2121 S. ALTERNATE A1A**
 CITY-ST-ZIP **JUPITER FL 33477**

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

TITLE **D** ☐ Delete
 NAME **GIBA, JOHN**
 STREET ADDRESS **222 S. US HWY ONE, #213**
 CITY-ST-ZIP **TEQUESTA FL 33469**

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

TITLE **DT** ☐ Delete
 NAME **DENT, PATTY**
 STREET ADDRESS **101 N. US HWY ONE**
 CITY-ST-ZIP **TEQUESTA FL 33459**

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

TITLE **P** ☒ Delete
 NAME **BERUBE, RICHARD**
 STREET ADDRESS **351 S US HWY ONE, ST 102**
 CITY-ST-ZIP **JUPITER FL 33477**

TITLE ☐ Change ☒ Addition
 NAME **PRESIDENT**
 STREET ADDRESS **ROBERT HOYLE**
 CITY-ST-ZIP **4502 S. US HWY ONE**
Jupiter, FL 33477

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:

REQUIRE **Robert Hoyle** **6/1/01**

CR2E037 (10/00)