

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05632

FILED
Apr 30, 2009
Secretary of State

Entity Name: JUPITER HARBOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1000 N. US #1
JUPITER, FL 334687446

New Principal Place of Business:

1000 N. US HWY#1
JUPITER, FL 334687446

Current Mailing Address:

1000 N US HWY 1
JA 600
JUPITER, FL 33477 US

New Mailing Address:

FEI Number: 59-2466078 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GELFAND, MICHAEL J
1555 PALM BEACH LAKES BLVD.
SUITE #1220
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEVINE, CAROL
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: VPD () Delete
Name: CLAUDETTE, GUINN
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: S () Delete
Name: FISCHER, ARLENE
Address: 1000 N. U.S. HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: D () Delete
Name: HARMON, RONALD
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: PD () Delete
Name: SHARP, GEORGE
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: TD () Delete
Name: STARMAN, PAULL
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: LEVINE, CAROL
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: D (X) Change () Addition
Name: FRED, SCHERRER
Address: 1000 N US HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: SD (X) Change () Addition
Name: FISCHER, ARLENE
Address: 1000 N. U.S. HWY 1, JA 600
City-St-Zip: JUPITER, FL 33477

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE FISCHER

SD

04/30/2009

Electronic Signature of Signing Officer or Director

Date