

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768198

FILED
Apr 16, 2018
Secretary of State
CC2361377364

Entity Name: CHASEWOOD OF JUPITER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6381 CHASEWOOD DRIVE
JUPITER, FL 33458

Current Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT
752 NORTH U.S. HWY 1
TEQUESTA, FL 33469 US

FEI Number: 59-2382304

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIELDS & BACHOVE PLLC
4440 PGA BOULEVARD
SUITE 308
PALM BEACH GARDENS, FL 33410 US

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: GARY FIELDS

04/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JOYCE, JAMES
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title VP
Name JOYCE, WILLIAM
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title DIRECTOR
Name RUSKAY, PATTY
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title DIRECTOR
Name KIRSCHBERG, KENNETH
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title SECRETARY
Name WILSON, JUDY
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title TREASURER
Name HOUCK, RON
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

Title DIRECTOR
Name MCKENNA, TOM
Address C/O COASTAL PROPERTY
 MANAGEMENT
 752 NORTH U.S. HWY 1
City-State-Zip: TEQUESTA FL 33469

I hereby 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 all other like empowered.

SIGNATURE: JUDY WILSON

SECRETARY

04/16/2018

Electronic Signature of Signing Officer/Director Detail

Date