

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35781

Entity Name: THE ISLANDS OF JUPITER PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Apr 26, 2023
Secretary of State
0203343915CC**Current Principal Place of Business:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE400
STUART, FL 34994**Current Mailing Address:**C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PARKWAY SUITE400
STUART, FL 34994 US**FEI Number:** 65-0171774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BACHOVE, EVAN ESQ
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:** EVAN BACHOVE

04/26/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	HILL, JACK
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

Title	TREASURER
Name	GIELEN, SABRINA
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

Title	SECRETARY
Name	SPICER, DAVID
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

Title	DIRECTOR
Name	BURKE, MARTHA
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

Title	PRESIDENT
Name	THURMOND, VINCENT
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

Title	DIRECTOR
Name	SALES, WAYNE
Address	C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE400

City-State-Zip: STUART FL 34994

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: VINCENT THURMOND**PRESIDENT**

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date