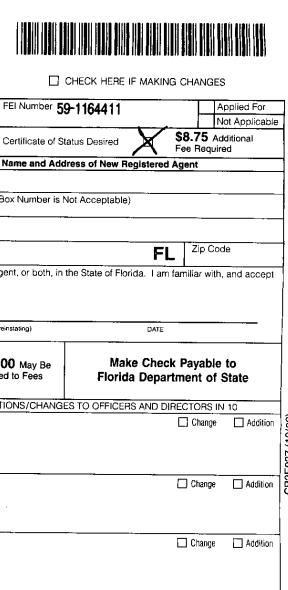
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701762

1. Entity Name

	JR INLET ASSOCIATION, INC	•							
P.O. BOX 46	ace of Business 0549 ALE FL 33346	Mailing Address P.O. 80X 460549 FT LAUDERDALE FL 33346 US	3		- - - 	88:8: (181) 28 :1 :0 3 (2)	11 0 1 0 101 0101	#1011 B1011 01	i Bér Ardız Yabı
2. Principal	Place of Business	3. Mailing Address	 						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE I	IF MAKING	CHANGES	3
City & St	ate	City & State	<u> </u>		4. FEI Number	59-1164411	 -		pplied For lot Applicable
Zip	Country	Zip	Country	·-	5. Certificate of	Status Desired	X	88.75 Ad ee Require	Iditional
	6. Name and Address of Curren	t Registered Agent			7. Name and Ad	dress of New Re	<u> </u>		
-			Nam	e					
	Eugenia d E 25th avenue		Stree	t Address (P.O. Box Number is	s Not Acceptable)			
FT. LAU	DERDALE FL 33316				- 100	 -		***.	
ı			City				FL	Zip Cod	de
8. The abov	re named entity submits this statement for	or the purpose of changing its	registered office	or register	ed agent, or both, i	n the State of Flor		<u>l</u> miliar with.	and accept
the obliga	ations of registered agent.								
CICNATURE									
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	E: Registered Agent sig	nature required	when reinstating)		DATE		
Seri Seri									
A.J.	FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		e Check a Departn	Payable nent of	
10.	OFFICERS AND DI								0.00
	OFFICERS AND DI	RECTORS	11.		DOITIONS/CHANG	GES TO OFFICER	,		
TITLE	VD	RECTORS Delete	11.	A	DDITIONS/CHANG	GES TO OFFICER	S AND DIRE	CTORS IN	J 10
NAME	VD KELLEY, PATRICK			A	DDITIONS/CHANG	GES TO OFFICER	S AND DIRE		
NAME STREET ADDRESS	VD KELLEY, PATRICK 1948 SE 22ND AVE		TITLE NAME STREET ADDRES		DDITIONS/CHANG	GES TO OFFICER	S AND DIRE	CTORS IN	J 10
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FILED Jan 09, 2003 8:00 am Secretary of State 01-09-2003 90051 037 ****70.00



CITY-ST-ZIP 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 attrachment with an address, with all other like empowered.

STREET ADDRESS

SIGNATURE: CUGENUS DUNCANE FELTSUIRED

STREET ADORESS

CITY-ST-ZIP

107/03

CR2E037 (10/02)