

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714654

FILED
Apr 29, 2008
Secretary of State

Entity Name: JUNO ISLES CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

ST JOHN, CORE, FIORE & LEMME, P. A.
CENTURION TOWER, STE 701, 1601 FORUM PLACE
WEST PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

JUNO ISLES CIVIC ASSOCIATION
P.O. BOX 14421
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMME, THERESA M. ESQ
ST JOHN, CORE, FIORE & LEMME, P. A.
CENTURION TOWER, STE 701, 1601 FORUM PLACE
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: P,SD () Delete
Name: JACKSON, JAMES M JR
Address: 12875 BARROW RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: CONTRERAS, BLAS
Address: 1820 CRAFTON RD.
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD () Delete
Name: HATTEN, WAYNE
Address: 1720 ARDLEY RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VD () Delete
Name: GREENE, KATHY
Address: 2100 ARDLEY RD
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP,D (X) Change () Addition
Name: JACKSON, JAMES M JR
Address: 12875 BARROW RD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SD (X) Change () Addition
Name: BITTENBINDER, BOB
Address: TUDOR RD.
City-St-Zip: NORTH PALM BEACH, FL 33408

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

Title: PD (X) Change () Addition
Name: GREENE, KATHY
Address: 2100 ARDLEY RD
City-St-Zip: NORTH PALM BEACH, FL 33408

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: KATHY GREENE

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date