## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Apr 22, 2005 8:00 am Secretary of State

DOCUMENT # 720677  1. Entity Name JUPITER ISLAND RESIDENTS ASSOCIATION, INC.							04	1-22-2005	90285 004	****61	.25
12450 SE DIXIE 1245 P.O. BOX 1551 P.O.			iling Address 1450 SE DIXIE O. BOX 1551 DBE SOUND, FL 33455								
2. Principal Place of Business 3.			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04122005 CI	ng-NP	CR2E037	(10/03)	
City & State			City & State				50 400 400 7			plied For t Applicable	
Zip	Country	Zip		Cou	Country		5. Certificate of St	atus Desired		8.75 Add ee Require	
6. Name and Address of Current Registered Agent							7. Name and Add	ress of New F	Registered Ag	ent	
KRISKE, MARY					Name						
6412 SHERWOOD ST					Street Address (P.O. Box Number is Not Acceptable)						
HOBE SOUND, FL 33455											
1					Cit					7:- 0	
					City		FL Zip Code				
	named entity submits this statement f tions of registered agent.	or the purp	ose of changing its r	egistere	ed office or	register	ed agent, or both, in	the State of Fl	orida. I am fai	miliar with,	and accept
SICNATURE											
SIGNATURE Signature. typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE										•	
Filing Fee is \$61.25 Due by May 1, 2005			9. Election Cam Trust Fund Co		Added to Fees			Make check payable to Florida Department of State			
10.	OFFICERS AND DIRECTORS						ADDITIONS/CHANG	ES TO OFFICE			
TITLE '	VP ANNIBALI, PHILIP		☐ Delete							Change	Addition
NAME STREET ADDRESS	112 N BEACH ROAD			NAME	ET ADDRESS		,				
CITY-ST-ZIP	HOBE SOUND, FL 33455		-ST-ZIP								
TITLE	Р		☐ Delete 111		:				į	Change	☐ Addition
NAME	VICENZI, JOYCE			NAM	E						
STREET ADDRESS	10 SADDLER TRAIL				ET ADDRESS						
CITY-ST-ZIP	HOBE SOUND, FL 33455	· · ·		-	-ST-ZIP						
TITLE	T HILL, RICHARD		☐ Delete	TITLE	1				İ	Change	Addition
NAME STREET ADDRESS	43 N. BEACH ROAD		-	NAMI STRE	ET ADORESS		-				
CITY-ST-ZIP	HOBE SOUND, FL 33455				·SI-ZIP						
TITLE	9		☐ flointe	TITLE			· · · · · · · · · · · · · · · · · · ·			Change	□ Addition

12. 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 attachment with an address, with all other like empowered.

NAME

TITLE

NAME

TITLE

NAME

STREET ADORESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

MAHONEY, JEAN B

102 PALMETTO TRAIL

HOBE SOUND, FL 33455

☐ Delete

Delete

20/05

☐ Change

☐ Change

Addition

☐ Addition