2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2006 8:00 am Secretary of State

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DOCUMENT #720677 1. Entity Name JUPITER ISLAND RESIDENTS ASSO				SOCIATION, INC.						04-03-2006	-		
1 F	Principal Place 12450 SE DIX P.O. BOX 155 HOBE SOUND,	IE 1		1245 P.O.	g Address 60 SE DIXIE BOX 1551 E SOUND, FL 334	55			i (817): 1 11 (8		\$ 000	78 25	
2. Principal Place of Business				3. Mailing Address							38 1 81811 91811 8	<u> </u>	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					03082006	Chg-NP	CR2E	37 (11/05)	_
City & State				City & State					50 100 1007			plied For at Applicable	
	Zip	****	Country	Ziş	0	Cou	intry		5. Certificate of	of Status Desired		\$8.75 Add Fee Required	
_		6. Name	and Address of Curren	t Registere	ed Agent				7. Name and	Address of Nev	v Registered	Agent	
(KRISKE, M 6412 SHEF HOBE SOL	RWOOD S					Name Street A	ddress (P.O. Box Numbe	r is Not Accepta	ble)		
							City				FI	L Zip Cod	e
			ty submits this statement tered agent.	for the purp	oose of changing its	register	ed office or	register	red agent, or both	h, in the State of	Florida. I an	n familiar with,	and accept
1	SIGNATURE _												
	SIGNATURE _	Signature, typed	d or printed name of registered age	ent and title if ap	plicable. (NOT	E: Registere	ed Agent signati	ure required	d when reinstating)		DATE		
-	· · · · · · · · · · · · · · · · · · ·	Filing Fe	d or pricted name of registered age	ent and title if ap	9. Election Cal	mpaign F	Financing	ure required	\$5.00 May B	e F	Make che	ck payable t	
		Filing Fe	ee is \$61.25 May 1, 2006		9. Election Cal Trust Fund	mpaign F Contribut	Financing tion.		\$5.00 May B	<u> </u>	Make che lorida Depa	artment of S	tate
	10.	Filing Fe	ee is \$61.25		9. Election Cal Trust Fund	mpaign F	Financing tion.		\$5.00 May B	<u> </u>	Make che lorida Depa	OIRECTORS IN	tate v 10
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Chard Hill

(172) 545-00>2

CITY-ST-ZIP

SIGNATURE: .

Richard Hill

Daytime Phone #