

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721963

FILED  
Feb 09, 2011  
Secretary of State

**Entity Name:** JUNO BY THE SEA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

630 OCEAN DR.  
JUNO BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

630 OCEAN DR.  
JUNO BEACH, FL 33408

**New Mailing Address:**

**FEI Number:** 59-1420702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRANT, ARDIS P  
630 OCEAN DR. #208  
JUNO BEACH, FL 33408 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: VP  
Name: DICKINSON, THOMAS  
Address: 630 OCEAN DR. #208  
City-St-Zip: JUNO BEACH, FL 33408

Title: D  
Name: LLORENS, HECTOR  
Address: 630 OCEAN DR APT 312  
City-St-Zip: JUNO BEACH, FL

Title: P  
Name: SESSA, LOUIS  
Address: 630 OCEAN DR 507  
City-St-Zip: JUNO BCH, FL 33408

Title: T  
Name: CARTIER, G W  
Address: 630 OCEAN DR 301  
City-St-Zip: JUNO BEACH, FL

Title: D  
Name: WAITEKUNAS, DENNIS  
Address: PO BOX 350  
City-St-Zip: SANDWICH, MA 02563

Title: D  
Name: KOENIG, KEN  
Address: 630 OCEAN DR. #510  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: ARDIS P. GRANT

SEC

02/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date