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Secretary of State
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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 733037

1. Corporation Name

JUPITER-TEQUESTA-JUNO BEACH CHAMBER COMMERCE, IN C.

540279 - 90289 - 47

Principal Place of Business	Mailing Address
800 N US HWY ONE JUPITER FL 33477 US	800 N US HWY ONE JUPITER FL 33477 US

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualifed
06/12/1975

4. FEI Number
59-1001660
☐ Applied For
☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BRUCE HEARD
1210 S. DIXIE HWY
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HEARD, BRUCE		1.2 NAME	
STREET ADDRESS	1210 S OLD DIXIE HWY		1.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33458		1.4 CITY-ST-ZIP	
TITLE	CD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BERUBE, RICHARD		2.2 NAME	
STREET ADDRESS	351 S US ONE #102		2.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33477		2.4 CITY-ST-ZIP	
TITLE	VCD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CATHEY, THOMAS		3.2 NAME	
STREET ADDRESS	1300 MOHAWK ST		3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL		3.4 CITY-ST-ZIP	
TITLE	VCD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	NICKERSON, DAVE		4.2 NAME	
STREET ADDRESS	1001 N US ONE STE 304		4.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33477		4.4 CITY-ST-ZIP	
TITLE	VCSD	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CARTER, FAYE		5.2 NAME	
STREET ADDRESS	220 VENUS ST #12		5.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33458		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	TARGETT, BEVERLY		6.2 NAME	
STREET ADDRESS	1001 JUPITER PK DR #116		6.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)