

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Sep 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736155** (3)
1. Corporation Name
JUPITER-TEQUESTA JUNIOR WOMAN'S CLUB, INC.



Principal Place of Business P. O. BOX 3811 TEQUESTA FL 33469	Mailing Address P. O. BOX 3811 TEQUESTA FL 33469
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/18/1976		3a. Date of Last Report 05/01/1996	
4. FEI Number 23-7352012		Applied For ☐ Not Applicable		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No							

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHERYL MOLTER
18751 S.E. RIVER RIDGE ROAD
TEQUESTA FL 33469

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 *Sheryl Molter* **SHERYL MOLTER** **9/9/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GRANT, TINA	1.2 NAME	
STREET ADDRESS	4440 COLETTE DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL	1.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	PD ☒ Change ☐ Addition
NAME	PFEIFFER, CAROL	2.2 NAME	
STREET ADDRESS	10126 ROYAL TERN WAY	2.3 STREET ADDRESS	19170 WATERWAY ROAD
CITY-ST-ZIP	TEQUESTA FL	2.4 CITY-ST-ZIP	TEQUESTA, FL
TITLE	VD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CONNELL, VON	3.2 NAME	
STREET ADDRESS	615 PAULINA ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	PUCCI, YVONNE	4.2 NAME	
STREET ADDRESS	495 SOUTH BEACH RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOBE SOUND FL	4.4 CITY-ST-ZIP	
TITLE	SD ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MERCER, DEBBIE	5.2 NAME	
STREET ADDRESS	1225 UTE ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	5.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MOLTER, SHERYL	6.2 NAME	
STREET ADDRESS	18751 S.E. RIVER RIDGE RD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL	6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *Sheryl Molter* **SHERYL MOLTER** **9/9/97** **571-747-2011**

CR2E037 (4/97)