

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90072 021 ****61.25

DOCUMENT # 749648

1. Entity Name

JUPITER VILLAGE COMMUNITY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 2050
 JUPITER FL 33468

P.O. BOX 2050
 JUPITER FL 33468

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1978912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZINK, KAREN
2581 JUPITER PARK DR
SUITE E-3
JUPITER FL 33458

Name

BEVERLEY JAMASON

Street Address (P.O. Box Number is Not Acceptable)

8259 N. MILITARY TRAIL #11

City

PALM BEACH GARDENS

FL

Zip Code

33410

8. 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

B. Jamason

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/14/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DV** ☐ Delete
 NAME **RINDFUSZ, JARED**
 STREET ADDRESS **2581 JUP PARK DR SUITE E-3**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ~~DIRECTOR~~ **Director & VP** ☒ Change ☐ Addition
 NAME **BEVERLEY JAMASON**
 STREET ADDRESS **8259 N. MILITARY TRAIL #11**
 CITY-ST-ZIP **PALM BCH. GONS. FL. 33410**

TITLE **TD** ☒ Delete
 NAME **SHAW, DARLENE A**
 STREET ADDRESS **2581 JUP PARK DR SUITE E-3**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ~~TREASURER~~ **TREASURER** ☒ Change ☒ Addition
 NAME **CHRIS SUTTMAN**
 STREET ADDRESS **8259 N. MILITARY TRAIL #11**
 CITY-ST-ZIP **PALM BCH. GONS. FL. 33410**

TITLE **PD** ☐ Delete
 NAME **GANNIS, DAVID**
 STREET ADDRESS **2581 JUP PARK DR SUITE E-3**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE ~~DIRECTOR & PRESIDENT~~ **DIRECTOR & PRESIDENT** ☒ Change ☐ Addition
 NAME **DAVID GANNIS**
 STREET ADDRESS **8259 N. MILITARY TRAIL #11**
 CITY-ST-ZIP **PALM BCH. GONS. FL. 33410**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DEPUTY SECRETARY** ☐ Change ☒ Addition
 NAME **SONNY RUSSELL**
 STREET ADDRESS **8259 N. MILITARY TRAIL #11**
 CITY-ST-ZIP **PALM BCH. GONS. FL. 33410**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

David Gannis
DAVID GANNIS

2/13/02

(561) 575-7136

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)