

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749648

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** JUPITER VILLAGE COMMUNITY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8259 N MILITARY TRAIL #11  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

8259 N MILITARY TRAIL #11  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 59-1978912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JAMASON, BEVERLEY  
8259 N MILITARY TRAIL  
SUITE #11  
PALM BEACH GARDENS, FL 33410 US

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

SEA BREEZE CMS, INC  
8259 N MILITARY TRAIL  
SUITE #11  
PALM BEACH GARDENS, FL 33410 US

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: SEA BREEZE CMS, INC

04/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NICHOLS, THOMAS  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP  
Name: COWAN, ALISON  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T  
Name: GAGLIA, DENISE  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D  
Name: RINDFUSZ, JARED  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D  
Name: MINEO, PETER  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D  
Name: MARTIN, SUE  
Address: 8259 N MILITARY TRAIL #11  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: THOMAS NICHOLS

P

04/06/2010

Electronic Signature of Signing Officer or Director

Date