2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 755559

1. Entity Name

JUPITER VILLAGE PHASE V HOMEOWNERS ASSOCIATION, INC.



FILED Apr 18, 2003 8:00 am Secretary of State

04-18-2003 90136 009 ****61.25

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Principal Plac	e of Business		Mailir	Mailing Address							
8259 N MILITARY TRAIL. SUITE 11 PALM BEACH GARDENS FL 33410 US				8259 N MILITARY TRAIL. SUITE 11 PALM BEACH GARDENS FL 33410 US				i (2011) (0021 O	10) Bi(S) G(#N) G(110 JG(# 01	OSE DENIL DINEL NENIL ALD	
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State			С	City & State				4. FEI Number 59-2199604 Applied For Not Applicable			
Zip	Zip Country			Zip Countr			5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7, Name and Address of New Registered Agent					
						Name	ſ	BEVER LET	AMAT	Spyl	
Gannis, David L 140 Timberland Drive						Street Address (P.O. Box Number is Not Acceptable) 8259 N. MILLITARY TRAIL #11					
JUPITER FL 33458											
						City P	ALM	BEACH O	GARDENS	FL Zip Cod	
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE 4903											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Florida Department of State		
10.		OFFICERS AND [NIDECTORS		11.			ADDITIONS/CHANG	ES TO OFFICERS AN	ID DIBECTORS IN	1.10
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NAME	GANNIS, D	AVID		Bulloto	NAMI						
STREET ADDRESS				STR							
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NAME	DICKINSON, ELINOR 114 TIMBERLINE DR				NAMI						
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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:

WORD FIREQUIDATE L. GANNIS

4/9/03 (561) 575-7136