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Mar 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **755560** (0)

1. Corporation Name

JUPITER VILLAGE PHASE VI HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 900 W. INDIANTOWN RD #210, JUPITER, FL P.O. BOX 3796 TEQUESTA FL 33469-7796	Mailing Address 900 W. INDIANTOWN RD #210, JUPITER, FL P.O. BOX 3796 TEQUESTA FL 33469-7796
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3. Date Incorporated or Qualified

12/16/1980

4. FEI Number

59-2251711

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

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

**CAMPBELL, THERESA
900 W. INDIANTOWN RD #210
JUPITER FL 33477**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **RUSSO, DON**
STREET ADDRESS **115 SHERWOOD CIR 25-C**
CITY-ST-ZIP **JUPITER FL**

TITLE **SD** ☒ DELETE

NAME **RIVERA, MICHELLE**
STREET ADDRESS **124 SHERWOOD CIR, 11A**
CITY-ST-ZIP **JUPITER FL**

TITLE **D** ☐ DELETE

NAME **CRAWFORD, RODNEY**
STREET ADDRESS **107 SHERWOOD CIR., 23A**
CITY-ST-ZIP **JUPITER FL**

TITLE **D** ☐ DELETE

NAME **VILLHAUER, BETTY**
STREET ADDRESS **138 SHERWOOD CIR., 19C**
CITY-ST-ZIP **JUPITER FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

NAME **SD MILLER, SUZANNE**
STREET ADDRESS **109 SHERWOOD CIR 24A**
CITY-ST-ZIP **JUPITER, FL 33458**

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

SIGNATURE:

Donald Russo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/98
Date

561-5750493
Daytime Phone # 0045070

CR2E037 (10/97)