

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2006 8:00 am**  
**Secretary of State**

03-09-2006 90155 025 \*\*\*\*61.25

**DOCUMENT # 755560**

1. Entity Name  
**JUPITER VILLAGE PHASE VI HOMEOWNERS  
ASSOCIATION, INC.**



Principal Place of Business  
**P.O. BOX 582  
JUPITER, FL 33468 US**

Mailing Address  
**P.O. BOX 582  
JUPITER, FL 33468 US**

**40027202**



02272006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2251711**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**ZINK, KAREN  
12214 61ST LANE N  
WEST PALM BEACH, FL 33412**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee Is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

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

TITLE	D
NAME	RUSSO, CELIA
STREET ADDRESS	106 SHERWOOD CIR 2B
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	D
NAME	JETTINGHOFF, CHRISTOPHER
STREET ADDRESS	113 SHERWOOD CIR 25B
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	T
NAME	SCHWIMER, HERBERT
STREET ADDRESS	112-5 D SHERWOOD CIR
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	V
NAME	CRAWFORD, RODNEY
STREET ADDRESS	107 SHERWOOD CIR 32 A
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** \_\_\_\_\_

**DONALD RUSSO PRESIDENT**  
*Donald Russo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/6/06**  
Date

**561-575-0493**  
Daytime Phone #