

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 21, 2007 8:00 am**  
**Secretary of State**

06-21-2007 90023 050 \*\*\*\*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**

**40121301**



03092007 No Chg-NP CR2E037 (4/06)

**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, 2007**

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 Pres.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*6/15/07*  
Date

*561-575-0493*  
Daytime Phone #