2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755563

FILED Mar 20, 2009 Secretary of State

Entity Name: JUPITER VILLAGE PHASE IX HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ER MANAGEN HIGHWAY #1, FL 33469					
Current Mailing Address:			New Maili	New Mailing Address:		
1340 U.S. H SUITE 102 JUPITER, F	HIGHWAY #1 FL 33469					
FEI Number:	59-2328856	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address o	f New Registered Agent:	
1340 US HI SUITE 102 JUPITER, F	FL 33469 US	submits this statement for the r	ournose of changing it	ts registered	d office or registered agent, or both,	
in the State		donnes une statement for the p	ourpose or changing in	is registered	d office of registered agent, or both,	
SIGNATUR						
	Electron	ic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SHAW, DARLE	WAY #1, SUITE 102	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	COOPRIDER, S	WAY #1, SUITE 102	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MEDWICK, DEN	WAY #1, SUITE 102	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	NICHOLS, TOM	WAY #1, SUITE 102	Title: Name: Address: City-St-Zip:	NICHOLS, T	IGHWAY #1, SUITE 102	
Title: Name: Address: City-St-Zip:	CANTATORE, A	WAY #1, SUITE 102	Title: Name: Address: City-St-Zip:	CANTATORE	IGHWAY #1, SUITE 102	
Title: Name: Address: City-St-Zip:	MILLS, SUSAN	Delete WAY #1, SUITE 102 3469	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEPHEN SKAKANDY MGR 03/20/2009