FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMEOF STATE

Sandra B. Mean

Secretary of te DIVISION OF CORRATIONS

DOCUMENT # 756526

(0)

JUPITER FARMS COMMUNITY CHURCH, INC.				
Principal Place of Business Mailing Address				
12600 W INDIANTOWN RD 12600 W INDIANTOWN RD JUPITER FL 33478-1678 JUPITER FL 33478-1678				3. Date Incorporated or Qualified
				02/26/1981 4. FEI Number / Applied For
0.00				59-2470029 Not Applicable
21	Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			6. Election Campaign Financing \$5.00 May Be	
City & State City & State			7. Is this nonprofit corporation a homeowners association?	
23		28		7. Is this horipronic corporation a nontroown as association.
Zip 24	Country	Zip	Gintry	6. This corporation owes or has paid the current year intangible
24	25 S Name and Address of O	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent
DD 011	PTORO 14 BOLLE BOOK		81 Name	<u></u>
DR CLIFFORD M DONALDSON			62 Street	Address (P.O. Box Number is Not Acceptable)
18221 N 125TH AVE JUPITER FL 33458				
JUPITE	K FL 33458		83	
			84 City	FL 85 Zip Code
11. Pursuant to the previsions of Sections 617.0502 and 617.1508, Florida Statutes, thetbove-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/amiliar with and accept the obligations of, Section 617.0503, Florida Stutes.				
CIONATURA MANUAL				
SIGNATURE Signature (speed or prince) Varie of registered agent and title if applicable. (NOTE: Represent Agent signature required when rehelating) DATE				
12.	OFFICERS AN	ID DIRECTORS	11	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	TD	DELETE	1.HITLE	Change 🔀 Addition
NAME	KATHY COLMAUGH		1.2NAME	PATRICK TAYLOR
STREET ADDRESS	5966 LOXAHATCHEE PINES	RD	1.31TREET ADDRESS	16329 Alexander Run
CITY-ST-ZIP	JUPITER, FL 00000		1.4CITY-ST-ZIP	JUPITER FL 33478
TITLE	PD	☐ DELETE	2.1 TITLE	Change 🔀 Addition C
NAME	DONALDSON, CLIFFORD		2.2 NAME	BOB HAYTON
STREET ADDRESS	12600 W. INDIANTOWN RD.		2.3 STREET ADDRESS	itati mellen in
CITY-ST-ZIP	JUPITER FL		2.4 CITY-ST-ZIP	JUPITEK , FL 33478
TITLE	0	DELETE	3.1717LE	Change MA Addition
NAME	CRAIG JONES		3.2 NAME	KINSTI DONALDSON
STREET ADDRESS	17547 N 133RD TRAIL		3.3 STREET ADDRESS	18221 N 125 th Ave
CITY-ST-ZIP	JUPITER FL		3.4. CITY-ST-ZIP	Jugiter FL 33478
TITLE	SD	☐ DELETE	4.1 TITLE	Change 🔀 Addition
NAME	ROGER L MEYERS		4. 2 NAME	JEFF SADALBR
STREET ADDRESS	15718 121ST TERR N		4.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER, FL		4.4 CITY - ST - ZIP	JUPITER PL 33478
TITLE		DELETE	5.1 TITLE	D ☐ Change ☑ Addition
NAME			5.2 NAME	DENISE MURPHY
STREET ADDRESS			5.3 STREET ADDRESS	10827 163 d Ch. N.
CITY-ST-ZIP			5.4 CITY - ST - ZIP	Jupiter Pt 33478
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			223900A TERRES & A	1

SIGNATURE:

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 of 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, of on an attachment with an address.

2/19/98 5617475379

FILED

Mar 05 1998 8:00am

Secretary of State