

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760869 (8)

1. Corporation Name

**SOUTHFORTE ONE AT JONATHAN'S LANDING CONDOMINIUM
ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**275 TONEY PENNA DR., STE. 10
JUPITER FL 33458**

**275 TONEY PENNA DR., STE. 10
JUPITER FL 33458**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/03/1981

3a. Date of Last Report
04/06/1994

4. FEI Number
59-2258359

Applied For
☐ Not Applicable

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐ **\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SUNRISE MANAGEMENT CO. OF THE PALM BCHES
275 TONEY PENNA DR., STE. 10
JUPITER FL 33458**

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 607.0102 and 607.1508, 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 607.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/6/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VS
BERKAW, ERNEST
3322 CASSEEKEY ISLAND
JUPITER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
MCCALL, DUKE
3322 CASSEEKEY ISL, PH3
JUPITER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

T
CARTER, HARVEY
3322 CASSEEKEY ISL 904
JUPITER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

ASS
KAARI, RICHARD
3322 CASSEEKEY ISL 903
JUPITER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
ROLFE, JUSTIN
3322 CASSEEKEY ISL RD
JUPITER FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition
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

P
Carter, Harvey
3322 Casseekey Isl Rd, #1104
Jupiter, FL 33477

T
Crampton, Thomas
3322 Casseekey Isl Rd, #601
Jupiter, FL 33477

D
Kaari, Richard
3322 Casseekey Isl Rd, #903
Jupiter, FL 33477

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/95 (407) 575-7792