**FILED** 

03-05-2001 90011 044 \*\*\*\*61.25

## **DOCUMENT # 761820**

1. Entity Name

JUNO OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business							
450 OCEAN DRIVE JUNO BEACH FL 33408							

Mailing Address

450 OCEAN DRIVE JUNO BEACH FL 33408

					<u> </u>	' Baran dian dian		
2. Principal Place of Business		3. Mailing Address			18118 (1811 8811 81811 81811	HAN HAN HAN	1 8 8 8 1 8 8 1	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number 59-218	30175		lied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status De		8.75 Additi	onal	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
MASCIARELLA, RAYMOND M. II 840 U.S. HIGHWAY ONE, SUITE 340			Name Street Address	Name Street Address (P.O. Box Number is Not Acceptable)				
#402 N. PALM BEACH FL 33408			City		FL	Zip Code		
8. The above	named entity submits this statement for Signature, typed or printed name of registered agent at		egistered office or regis		te of Florida.			
	Signature, typed or printed name of registered agent at	T (NOTE: F	registered Agent algination requ	TOO WHOTH OHIOCELING!				
	FILE NOW: FEE IS \$61.25	9. Election Campaign F Trust Fund Contribut		Make Check Payable to Department of State				
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRE	CTORS IN 1	0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EMEIGH, JOE 450 OCEAN DR JUNO BCH. FL 33408	🖪 Delete	TITLE PI NAME STREET ADDRESS CITY-ST-ZIP	DSARNACKI, CAR 450 OCEAN I JUND BCH. FL		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SARNACKI,CARL 450 OCEAN DR # 706 JUNO BEACH FL 33408	☐ Delete	TITLE VD3 NAME -STREET ADDRESS CITY-ST-ZIP	CHKADER, JAME 450 OCEAN D JUND BCH, F	DR #306	<b>S</b> Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEMOLI, ANTHONY 450 OCEAN DR # 1101 JUNO BCH FL 33408	☐ Delete	TITLE .E  NAME STREET ADDRESS CITY-ST-ZIP	450 OCEA JUNG BLY	1, FL. 334	68	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHRADER, JANET 450 OCEAN DR, #306 JONU BEACH FL 33408	☐ Delete	TITLE 5/, NAME STREET ADDRESS CITY-ST-ZIP	4043 CYI	PRESS HOLLOW CH GARDENS	PRIVE	■ Addition 33448	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MADDIAN, THOMAS 450 OCEAN DR # 505 JUNO BEACH FL 33408	🔯 Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	450 OCEA	RGES IN DR. #901 o, FL 3340	□ Change	Addition	
TITLE NAME STREET ADDRESS	22112 2212111 2 22 122	☐ Delete	TITLE NAME STREET ADDRESS		I	Change	Addition	

12. 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 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

2/21/01

(561) 624-1209

Daytime Phone #