2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2003 8:00 am
Secretary of State
07-16-2003 90041 041 ****61.25

DOCUMENT # 761820

1. Entity Name

JUNO OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
450 OCEAN DRIVE JUNO BEACH FL 33408	450 OCEAN DRIVE JUNO BEACH FL 33408

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
450 OCEAN DRIVE	450 OCEAN DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: JUNO BEACH, FL	City & State: JUNO BEACH, FL
Zip: 33408 Country: USA	Zip: 33408 Country: USA

4. FEI Number 59-2180175 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MASCIARELLA, RAYMOND M. II
840 U.S. HIGHWAY ONE, SUITE 340
#402
N. PALM BEACH FL 33408

7. Name and Address of New Registered Agent

Name: BECKER & POLIAKOFF, P.A.
Street Address (P.O. Box Number is Not Acceptable): 500 Australian Ave. So., 9TH Floor
City: WEST PALM BEACH FL Zip Code: 33401

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: PETER C. MOLLENGARDEN, ATTY. DATE: 7/7/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
After September 10, 2003, min will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SARNACKI, CARL 450 OCEAN DR #706 JUNO BEACH FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHRADER, JANET 450 OCEAN DRIVE #306 JUNO BEACH FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEMOLI, ANTHONY 450 OCEAN DR # 1101 JUNO BCH FL 33408	☒ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	BOB CONNORS 450 OCEAN DR #1203 JUNO BEACH, FL. 33408 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROSOW, JULIE 9043 CYPRESS HOLOW DRIVE PALM BEACH GARDENS FL 33448	☒ Delete	TITLE SD / NAME / STREET ADDRESS / CITY-ST-ZIP	TRACEY SPAFFORD 10282 FOX TRAIL DR SO. WEST PALM BCH, FL 33411 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HARGES, PAUL 450 OCEAN DRIVE #901 JUNO BEACH FL 33408	☐ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	VLADIMIR KOVACEVICH 450 OCEAN DR #201 JUNO BEACH, FL 33408 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (4/03)

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.

SIGNATURE: TRACEY SPAFFORD TRACEY SPAFFORD 7/7/03 (561) 627-1602