## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

SIGNATURE:

## **FILED** May 12, 2002 8:00 am § Secretary of State **DOCUMENT # 768797** 1. Entity Name JOGGERS RUN PROPERTY OWNERS ASSOCIATION, INC. 05-12-2002 90838 046 \*\*\*\*61.25 Principal Place of Business Mailing Address 2328 S CONGRESS AVE 2328 S CONGRESS AVE 1-C WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 51-0281327 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Hiller BANYAN PROPERTY MANAGEMENT SERVICES, INC Prosperite 2328 S CONGRESS AVE SUITE 1-C WEST PALM BEACH FL 33405 Zip Code statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida 8. The above named entity submits SIGNATURE apolicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. SD TITLE TITLE Delete ☐ Change Addition NAME CUNGDON, JOANN RICKY R. Petry 2603 maplewood NAME STREET ADDRESS 2605 MAPLEWOOD DR STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33415 CITY-ST-ZIP Nest Palin Beach, FL 33 TITLE **X**Delete TITLE Patricia Bondonese EVANS, TODD S NAME NAME STREET ADDRESS 1803 MAPLEWOOD DR. STREET ADDRESS 1403 maplewood Drive CITY-ST-ZIP W...PALM BCH...FL. CITY-ST-ZIP Nest-Palm-Beach-Fl Delete TITLE ☐ Addition NAME Turcotte, dick NAME STREET ADDRESS 906 MAPLEWOOD DR. STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition NAME KEIM, ELIZABETH NAME STREET ADDRESS 1004 MAPLEWOOD DR STREET ADDRESS CITY-ST-ZIP west palm beach fl CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NELSON, RAE NAME NAME STREET ADDRESS 1805 MAPLEWOOD DRIVE STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33415 CITY-ST-ZIP TITLE ☐ Delete TITI F □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

4-17-02 478-1615