

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768797

FILED
Mar 03, 2006
Secretary of State

Entity Name: JOGGERS RUN PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2328 S CONGRESS AVE
1-C
WEST PALM BEACH, FL 33406

New Principal Place of Business:

2328 S CONGRESS AVE
SUITE 1 C
WEST PALM BEACH, FL 33406

Current Mailing Address:

2328 S CONGRESS AVE
1-C
WEST PALM BEACH, FL 33406

New Mailing Address:

2328 S CONGRESS AVE
SUITE 1 C
WEST PALM BEACH, FL 33406

FEI Number: 51-0281327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY, J. DONALD P.A.
860 US HWY ONE
STE 108
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CUERVO, AL
Address: 1904 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VD () Delete
Name: BONDONESE, PATRICIA
Address: 1403 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: STD () Delete
Name: KEIM, ELIZABETH
Address: 1004 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL

Title: PD () Delete
Name: NELSON, RAE
Address: 1805 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D (X) Delete
Name: MEEKER, JENNIFER
Address: 1706 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BONDONESE, PATRICIA
Address: 1403 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SDT (X) Change () Addition
Name: KEIM, ELIZABETH
Address: 1004 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL

Title: PD (X) Change () Addition
Name: YOUNCE, CRAIGE
Address: 2103 MAPLEWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG YOUNCE

PD

03/03/2006

Electronic Signature of Signing Officer or Director

Date