

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000000734**

1. Entity Name

JUPITER FESTIVAL, LTD.

Principal Place of Business

**7443 LEE DAVIS ROAD, #300
MECHANICSVILLE VA 23111**

Mailing Address

**7443 LEE DAVIS ROAD, #300
MECHANICSVILLE VA 23111-4400**

2. Principal Place of Business

201 North U.S. Hwy One

3. Mailing Address

201 North U.S. Hwy One

Suite, Apt. #, etc.

D-5

Suite, Apt. #, etc.

D-5

City & State

Jupiter, FL

City & State

Jupiter, FL

4. FEI Number

65-0589275

Applied For

Not Applicable

Zip

33477

Country

Palm Beach

Zip

33477

Country

Palm Beach

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J ESQ.

500 EAST BROWARD BOULEVARD, SUITE 1950

FORT LAUDERDALE FL 33394-3029

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$2,596,203.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P95000031473**
NAME **JUPITER LAND DEVELOPMENT CO., INC.**
STREET ADDRESS **7443 LEE DAVIS ROAD, #300**
CITY - ST - ZIP **MECHANICSVILLE VA 23111**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **201 North U.S. Hwy One, D-5**

CITY - ST - ZIP **Jupiter, FL 33477**

STREET ADDRESS **000003260220--3**

CITY - ST - ZIP **05/22/00-01005-003**

STREET ADDRESS ******526.25 ****526.25**

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-24-00

Date

561/747-4883

Daytime Phone #

0020411 1/1

CR21E003 (1/1)