

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 01, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90196 001 \*\*\*750.00

**DOCUMENT # F96000005788**

1. Entity Name  
JUPITER INTERVAL CO., INC.



Principal Place of Business  
551 5TH AVE SUITE 1916  
NEW YORK, NY 10176

Mailing Address  
C/O THE OLD MOUNTAIN CO  
225 WEST WACKER, SUITE 1500  
CHICAGO, IL 60606 US

**66003279**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02112006 Chg-P CR2E034 (11/05)

4. FEI Number  
13-3914368

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

Name

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

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME PIROVANO, JOHN A  
STREET ADDRESS 551 5TH AVE, STE 1916  
CITY-ST-ZIP NEW YORK, NY

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME FIELD, MARSHALL V  
STREET ADDRESS 225 WEST WACKER DRIVE, SUITE 1500  
CITY-ST-ZIP CHICAGO, IL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME PALLADINO, ALBERTA A  
STREET ADDRESS 5 NORTH A1A  
CITY-ST-ZIP JUPITER, FL 33477

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1001 NORTH U.S. HWY. 1, SUITE 205  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE T ☐ Delete  
NAME SPIOTTA, RONALD J  
STREET ADDRESS 225 WEST WACKER DRIVE, SUITE 1500  
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS HAMMOND, TORRENCE K.  
CITY-ST-ZIP

TITLE AS ☐ Delete  
NAME SVEC, CHRISTINE  
STREET ADDRESS 225 WEST WACKER DRIVE, SUITE 1500  
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: *Christine Svec*

Christine Svec, Asst. Sec'y. 2/22/06 312-917-1813

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #