

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G93137

FILED
Apr 26, 2009
Secretary of State

Entity Name: JUNO ISLES BOAT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11380 PROSPERITY FARMS ROAD, SUITE 201
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

11380 PROSPERITY FARMS ROAD, SUITE 201
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, GEORGE E.
11380 PROSPERITY FARMS RD., SUITE 201
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONDIK, THOMAS
Address: 1782 TUDOR RD
City-St-Zip: JUNO ISLES, FL

Title: S () Delete
Name: WYMAN, BRUCE
Address: 1796 TUDOR RD
City-St-Zip: JUNO ISLES, FL

Title: T () Delete
Name: NASUTI, THOMAS
Address: 12954 WILTON RD
City-St-Zip: JUNO BEACH, FL 33408

Title: BM () Delete
Name: JACKSON, JIM
Address: 12875 BARROW ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS MONDIK

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

Date