FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLOR DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # J70455 (7) 1. Corporation Name JUPITER BAY EAST DEVELOPMENT COMPANY Principal Place of Business Mailing Address 700 A1A HWY. P 0 BOX 3351 P 0 ROX 3351					
JUPITER FL		P O BOX 3351 Jupiter FL 33469		Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pl	lace of Business	2a. Mailing Address		05/01/1987 4. FEI Number	04/13/1995
21		26		59-2832695	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	[] \$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Ζίρ 24	Country 25	Zip	Country	8. This corporation has liability for in	
<u>+-1</u>	9. Name and Address of Cu	rrent Registered Agent	30	Florida Statutes Yes 10. Name and Address of New Re	
			B1 Name	TO. Name and Address of New He	gistereo Agent
RATHKE	, R. C.		99 Stroot Add	rono (D.O. Carabi - N	
700 A1A			82 Street Add	ress (P.O. Box Number is Not Acceptable	9)
JUPITER	RFL 33469		83		
			84 City		■■ 85 Zip Code
familiar wit	th, and accept the obligations of,	Section 607.0505, Florida Statute	s.	ration submits this statement for the purp and of directors. I hereby accept the appoi	ose of changing its registered office ntrnent as registered agent. I am
12.	Signature, typed or printed name of registered	agent and little if applicable. (N AND DIRECTORS	OTE: Registered Agent signature require 13.		DATE
TITLE	P	DELETE	1. 1 TITLE	ADDITIONS/CHANGES TO OFFIC	<u>-</u>
NAME	RATHKE, RICHARD		12 NAME		Change Addition
STREET ADDRESS	700 A1A HWY.		1.3 STREET ADDRESS		
CITY - ST - ZIP	JUPITER FL		1.4 CITY - ST - ZIP		
TITLE	VP	DELETE	2 1 THTLE		☐ Change ☐ Addition
NAME OTOSST INDOSSOS	RATHKE, CAROLA 700 A1A HWY		. 22 NAME		
STREET ADDRESS	JUPITER FL		2.3 STREET ADDRESS		
CITY-S1-ZIP TITLE	S	[7] DELETE	2.4 CHY-SY-ZIP		
NAME	RATHKE, CRISTINA		3 1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	700 A1A HWY		3.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		İ
TITLE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		TT DELETE	54 CITY-ST-ZIP		
NAME		☐ perrit	6 1 THTLE		Change Addition
STREET ADDRESS			6.2 NAME		
CHTY-S1-ZIP			6.3 STREET ADDRESS 6.4 City-St-Zip		
14. I do hereby certify that to oath; that I		rooration or the receiver or truste	ished and does not qualify fo ual report is true and accurate empowered to execute this	or the exemption stated in Section 119.07 te and that my signature shall have the sa s report as required by Chapter 607, Floric	

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/21/96 407-7461450