2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000694

FILED Sep 07, 2006 Secretary of State

Entity Name: THE FRIENDS OF NORTH PALM BEACH HEIGHTS OF JUPITER, INC.

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 2233 JUPITER, FL 33458

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 2233 JUPITER, FL 33458

FEI Number: 65-1103389 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BIGGAN, MICHAEL KRAUSE, SHANNON 6382 LESLIE STREET G293 MICHAEL STREET JUPITER, FL 33458 US JUPITER, FL 33458 US

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: SHANNON KRAUSE 09/07/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DC () Delete Title: DC (X) Change () Addition

 Name:
 BIGGAN, MICHAEL
 Name:
 PIERCE, GINA

 Address:
 6382 LESLIE STREET
 Address:
 6129 POMPANO ST

 City-St-Zip:
 JUPITER, FL 33458
 City-St-Zip:
 JUPITER, FL 33458

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 DIXON, KELLY
 Name:
 KRAUSE, SHANNON

 Address:
 15133 HARRIET AVENUE
 Address:
 6293 MICHAEL STREET

 City-St-Zip:
 JUPITER, FL 33458
 City-St-Zip:
 JUPITER, FL 33458

Title: DS () Delete Title: DS (X) Change () Addition
Name: HEE, CHRISTINA L Name: GAITHER, NANCY

 Address:
 6160 LESLIE ST
 Address:
 6074 KENDRICK STREET

 City-St-Zip:
 JUPITER, FL 33469
 City-St-Zip:
 JUPITER, FL 33458

Title: DVC () Delete Title: DVC (X) Change () Addition

 Name:
 MICKLEY, STEVE
 Name:
 GENTILE, ROBERT

 Address:
 6446 REUEFLE CHELE SOUTH
 Address:
 6060 DRAKE STREET

 City-St-Zip:
 JUPITER, FL 33458
 City-St-Zip:
 JUPITER, FL 33458

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: SHANNON KRAUSE DT 09/07/2006