

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001653

FILED
Feb 05, 2009
Secretary of State

Entity Name: JUPITER CREEK PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1102 W. INDIANTOWN RD
7
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

C/O GOUVERT
PO BOX 273445
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 54-2073218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOUVERT, DOLORES
6842 BRIDLEWOOD CT
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

GOUVERT, DOLORES F RA
6842 BRIDLEWOOD CT
BOCA RATON, FL 33433 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: DOLORES F. GOUVERT

02/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CULLIFER, RICHARD H
Address: 658 W INDIANTOWN RD, STE 204
City-St-Zip: JUPITER, FL 33458

Title: PD (X) Delete
Name: ROSEN, PETER M
Address: 1102 W INDIANTOWN RD
City-St-Zip: JUPITER, FL 33458

Title: TD () Delete
Name: COHEN, HOWARD
Address: 9695 W. BROWARD BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD () Delete
Name: REID, JAX
Address: 1102 N INDIAN TOWN RD. #5
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CULLIFER, RICHARD H
Address: 400 S. US1 #4
City-St-Zip: JUPITER, FL 33477

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

Title: TD (X) Change () Addition
Name: COHEN, HOWARD
Address: 9695 W. BROWARD BLVD
City-St-Zip: PLANTATION, FL 33324

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOLORES F. GOUVERT

RA

02/05/2009

Electronic Signature of Signing Officer or Director

Date