## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001751

FILED Apr 26, 2006 Secretary of State

Entity Name: JUNO DUNES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:  C/O CAPITAL REALTY ADVISORS, INC. 600 SANDTREE DR., #109 WEST PALM BEACH, FL 33403  Current Mailing Address:  C/O CAPITAL REALTY ADVISORS, INC. 600 SANDTREE DR., #109 WEST PALM BEACH, FL 33403  Current Mailing Address:  C/O CAPITAL REALTY ADVISORS, INC. 600 SANDTREE DR., #109 WEST PALM BEACH, FL 33403  FEI Number: 57-1173047  FEI Number Not Applicable () WEST PALM BEACH, FL 33403  FEI Number: 57-1173047  FEI Number Not Applicable () WEST PALM BEACH, FL 33403  FEI Number Not Applicable () WEST PALM BEACH, FL 33403  FEI Number Not Applicable () WEST PALM BEACH, FL 33403  FEI Number Not Applicable () WEST PALM BEACH, FL 33403  JUPITER MANAGEMENT, LLC 1340 U.S. HIGHWAY #1 SUITE. 102 JUPITER, FL 33469  JUPITER MANAGEMENT, LLC 1340 U.S. HIGHWAY #1 SUITE. 102 JUPITER, FL 33469  JUPITER, FL 33469  WEST PALM BEACH, FL 33403 US  The above named entity submits this statement for the purpose of changing its registered office or registere in the State of Florida.  SIGNATURE:  SIGNATURE:  SIEPHEN SKAKANDY  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS  Title:  D () Delete Name: MCKINNEY, DIANA Address: 473 JUNO DUNES WAY Address: 473 JUNO BEACH, FL 33408  City-St-Zip: NORTH PALM BEACH, FL 33408	d Agent:
### SOO SANDTREE DR, #109 WEST PALM BEACH, FL 33403  **Current Mailing Address:**  **C/O CAPITAL REALTY ADVISORS, INC.**  **SOO SANDTREE DR, #109 WEST PALM BEACH, FL 33403  **THE NUMBER PALM BEACH, FL 33403  **FEI Number: 57-1173047  **FEI Number Applied For () FEI Number Not Applicable () Certificate of State of State of State of State of State of State of Florida.  **MCDONALD, DONNA**  ### MCDONALD, DONNA**  ### MCDONALD, DONNA**  ### MCDONALD, DONNA**  ### BEACH, FL 33403 US  ### US JUPITER, FL 33469  ### WEST PALM BEACH, FL 33403 US  ### The above named entity submits this statement for the purpose of changing its registered office or registered in the State of Florida.  ### SIGNATURE:**  ### SIGNATURE:**  ### SICHERS AND DIRECTORS:**  ### ADDITIONS/CHANGES TO OFFICERS  ### ADDITIONS/CHANGES TO OFFICERS  ### ADDITIONS/CHANGES TO OFFICERS  ### Address: 473 JUNO DUNES WAY Address: 473 JUNO DUNES WAY Address: 423 JUNO BEACH, FL 33408  ### CITY-SI-ZIP:  ### Title: D () Delete Name: O'BRIEN, DENNIS Address: 427 JUNO DUNES WAY ADDRES WAY ADDR	d Agent:
C/O CAPITAL REALTY ADVISORS, INC.  500 SANDTREE DR., #109 WEST PALM BEACH, FL 33403  FEI Number: 57-1173047  FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Sta  Name and Address of Current Registered Agent:  Name and Address of New Registered MCDONALD, DONNA STEE. 109 WEST PALM BEACH, FL 33403 US  JUPITER MANAGEMENT, LLC 1340 U.S. HIGHWAY #1 SUITE. 102 JUPITER MANAGEMENT, LLC 1340 U.S. HIGHWAY #1 SUITE. 102 JUPITER, FL 33469 US  The above named entity submits this statement for the purpose of changing its registered office or registere in the State of Florida.  SIGNATURE: STEPHEN SKAKANDY  CIPITARY  O4/26/20  Electronic Signature of Registered Agent  Date  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS  Title: D () Change () Additional Name: Address: 473 JUNO DUNES WAY City-St-Zip: NORTH PALM BEACH, FL 33408  Title: D () Delete Title: North PALM BEACH, FL 33408  City-St-Zip: JUNO DUNES WAY  Address: 427 JUNO DUNES WAY	d Agent:
### SANDTREE DR., #109 WEST PALM BEACH, FL 33403 ### STEI Number: 57-1173047 ### FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of State  ### Name and Address of Current Registered Agent:    Name and Address of New Registered Agent:   Name and Address of New Registered Agent:	d Agent:
Name and Address of Current Registered Agent:  MCDONALD, DONNA 600 SANDTREE DR. STE. 109 WEST PALM BEACH, FL 33403 US  The above named entity submits this statement for the purpose of changing its registered office or registere in the State of Florida.  SIGNATURE: STEPHEN SKAKANDY  CITIE:  D () Delete Name: MCKINNEY, DIANA Address: 473 JUNO DUNES WAY Address: City-St-Zip: NORTH PALM BEACH, FL 33408  City-St-Zip: Title: D () Delete Title: D () Change () Additional Name: Address: City-St-Zip: Title: D () Delete Title: D () Change () Additional Name: Address: City-St-Zip: Title: D () Delete Title: D () Change () Additional Name: COHEN, DAVID Address: 423 JUNO DUNES WAY Address: City-St-Zip: Title: D () Delete Title: D () Change () Additional Name: COHEN, DAVID Address: 423 JUNO BEACH, FL 33408  City-St-Zip: Title: D () Change () Additional Name: City-St-Zip: Title: D (X) Change (X) Address: City-St-Zip: Title: D (X) Change (X) Address: City-St-Zip: Title: D (X) Change (X) Addre	d Agent:
MCDONALD, DONNA  600 SANDTREE DR.  STE. 109  WEST PALM BEACH, FL 33403 US  The above named entity submits this statement for the purpose of changing its registered office or registers in the State of Florida.  SIGNATURE: STEPHEN SKAKANDY  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  Title: D () Delete Name: MCKINNEY, DIANA Address: 473 JUNO DUNES WAY Address: 473 JUNO DUNES WAY  Title: D () Delete Name: COHEN, DAVID Name: SANSEVERINO, TONY Address: 472 JUNO DUNES WAY Address: 472 JUNO DUNES WAY Address: 472 JUNO DUNES WAY Address: ANSEVERINO, TONY Address: ANSEVERINO, TONY Address: 472 JUNO DUNES WAY	red agent, or both,
SOU SANDTREE DR. STE 109 WEST PALM BEACH, FL 33403 US  The above named entity submits this statement for the purpose of changing its registered office or registere in the State of Florida.  SIGNATURE: STEPHEN SKAKANDY  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS  Title: D () Delete Name: MCKINNEY, DIANA Address: 473 JUNO DUNES WAY City-St-Zip: NORTH PALM BEACH, FL 33408  Title: D () Delete Name: COHEN, DAVID Name: COHEN, DAVID Address: 423 JUNO DUNES WAY City-St-Zip: JUNO BEACH, FL 33408  Title: D () Delete Title: D () Change () Additional Name: Address: 423 JUNO BEACH, FL 33408  Title: D () Delete Title: D () Change () Additional Name: Address: 423 JUNO BEACH, FL 33408  Title: D () Delete Title: D () Change () Additional Name: Address: 423 JUNO BEACH, FL 33408  Title: D () Delete Title: D (X) Change () Additional Name: Name: SANSEVERINO, TONY Name: O'BRIEN, DENNIS Address: 472 JUNO DUNES WAY	_
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  Title: D ( ) Delete Name: MCKINNEY, DIANA Address: 473 JUNO DUNES WAY City-St-Zip: NORTH PALM BEACH, FL 33408  Title: D ( ) Delete Name: COHEN, DAVID Address: 423 JUNO DUNES WAY City-St-Zip: JUNO BEACH, FL 33408  Title: D ( ) Delete Title: D ( ) Change ( ) Additional Control	006
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Name:         COHEN, DAVID         Name:           Address:         423 JUNO DUNES WAY         Address:           City-St-Zip:         JUNO BEACH, FL 33408         City-St-Zip:           Title:         D () Delete         Title:         D (X) Change () Additing Name:           Name:         SANSEVERINO, TONY         Name:         O'BRIEN, DENNIS           Address:         472 JUNO DUNES WAY         Address:         427 JUNO DUNES WAY	ion
Name:     SANSEVERINO, TONY     Name:     O'BRIEN, DENNIS       Address:     472 JUNO DUNES WAY     Address:     427 JUNO DUNES WAY	ion
Title:       ( ) Delete       Title:       D ( ) Change (X) Additi         Name:       Name:       OAKDEN, WALTER         Address:       Address:       467 JUNO DUNES WAY         City-St-Zip:       NORTH PALM BEACH, FL 33408	
Title:       ( ) Delete       Title:       D ( ) Change (X) Additi         Name:       Name:       VINCENT, PAUL         Address:       Address:       460 JUNO DUNES WAY         City-St-Zip:       City-St-Zip:       JUNO BEACH, FL 33408	ion
Title: ( ) Delete Title: D ( ) Change (X) Additi Name: Name: MACKLE, LORETTA Address: Address: 409 JUNO DUNES WAY City-St-Zip: JUNO BEACH, FL 33408	

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.

04/25/2500	SIGNATURE: DIANA MCKINNEY D 04/26/2006
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