

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001751

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: JUNO DUNES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

18176 JUPITER LANDINGS DR.  
C/O FLORIDA'S CHOICE MANAGEMENT  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

601 HERITAGE DRIVE,  
SUITE 223  
JUPITER, FL 33458

**New Mailing Address:**

601 HERITAGE DRIVE,  
SUITE 228  
JUPITER, FL 33458

FEI Number: 57-1173047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COPPLE, RYAN PA  
601 HERITAGE DRIVE,  
SUITE 223  
JUPITER, FLORIDA, FL 33458 US

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

COPPLE, RYAN PA  
601 HERITAGE DRIVE,  
SUITE 228  
JUPITER, FLORIDA, 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: \_\_\_\_\_

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MACKLE, LORETTA  
Address: 409 JUNO DUNES WAY  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D  
Name: OATMAN, ROBERT  
Address: 403 JUNO DUNES WAY  
City-St-Zip: JUNO BEACH, FL 33408

Title: T  
Name: HERBSMAN, JACKIE  
Address: 439 JUNO DUNES WAY  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: S  
Name: TAYLOR, WILLIAM  
Address: 421 JUNO DUNES WAY  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP  
Name: RINGDAHL, DANIEL  
Address: 468 JUNO DUNES WAY  
City-St-Zip: JUNO BEACH, FL 33408

Title: D  
Name: COHEN, DAVID  
Address: 423 JUNO DUNES WAY  
City-St-Zip: JUNO BEACH, FL 33408

I hereby 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 all other like empowered.

SIGNATURE: LORETTA MACKLE

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date