

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011889

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** JUPITER NOSERIDERS FOUNDATION, INC.

**Current Principal Place of Business:**

335 FLAGLER BLVD.  
LAKE PARK, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

335 FLAGLER BLVD.  
LAKE PARK, FL 33403

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

KEETON, WILLIAM C  
335 FLAGLER BLVD.  
LAKE PARK, FL 33403      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title:                      D                      ( ) Delete  
Name:                      ARNOLD, THOMAS M  
Address:                      20 BEVERLY ROAD EAST  
City-St-Zip:                      JUPITER, FL 33469

Title:                      D                      ( ) Delete  
Name:                      MURRY, FRANK D  
Address:                      19146 SE HOMEWOOD  
City-St-Zip:                      JUPITER, FL 33469

Title:                      D                      ( ) Delete  
Name:                      MITCHELL, DAVID  
Address:                      510 WILLET AVE.  
City-St-Zip:                      JUPITER, FL 33458

Title:                      D                      ( ) Delete  
Name:                      KEETON, WILLIAM C  
Address:                      335 FLAGLER BLVD.  
City-St-Zip:                      LAKE PARK, FL 33403

Title:                      D                      ( ) Delete  
Name:                      SCOTTEN, JOHN  
Address:                      10945 SE HARKEN TERR.  
City-St-Zip:                      JUPITER, FL 33469

Title:                      D                      (X) Delete  
Name:                      MCDOW, JAMES  
Address:                      403 W. RIVERSIDE DR.  
City-St-Zip:                      TEQUESTA, FL 33469

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

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: WILLIAM KEETON

D

04/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date