FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Date

Daytime Phone # 0044181

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

N05632

(7)

Mailing Address

JUPITER HARBOUR CONDOMINIUM ASSOCIATION, INC.

1000 N. U\$ #1 P.O. BOX 446 JUPITER FL 334	168- 7446	PO BOX 446 Jupiter FL 33468-0446 US			2 Cate bearings and at Outlified	3a. Date of Last Report
					3. Date Incorporated or Qualified 10/12/1984	04/18/1996
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-2466078	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
		28		Trust Fund Contribution	Added to Fees	
Zip Country		Zip Country		У	8. This corporation has liability for i	ntangible tax under s. 199.032,
4]			30		Florida Statutes	
	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent
			8	Name		
	I PROPERTY MANAGEMENT INC	,	8:	Street A	ddress (P.O. Box Number is Not Acceptab	le)
50 US HIGHWAY ONE			8	-		
SUITE 206 JUPITER FL 33477			*	1		
JUPITER	FE 334//		8	City		FL 85 Zip Code
11. Pursuant to office or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 617.1508, Florida Statutes of Florida, Such change was autions of Section 617.0503, Florida	the abo	ve-named o	corporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered ages OFFICERS AND		13.	gent signature i	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE SERS AND DIRECTORS IN 12
TITLE	VPD VPD	DELETE	1.1 TITLE		ADDITIONS OF IAMAGE TO STITLE	Change Addition
NAME	BERNATIA, STANLEY		1.2 NAM			
STREET ADDRESS	1000 M US 7 BA 302			ET ADDRESS		
CITY-ST-7IP	JUPITER FL			ST-ZIP		
TITLE	PD	☐ DELETE 217				☐ Change ☐ Addition
NAME	Lambert, James		2.2 NAM	:		
STREET ADDRESS	1000 N US 1 #502		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP		
TITLE	TD DELETE 3.		3.1 TITLE			Change Addition
NAME	CREELMAN, WILLIAM		3.2 NAM	:		
STREET ADDRESS	1000 NO US 1, BER #501		3.3 STRE	ET ADDRESS		
CITY-ST-ZIP	JUPITER FL		3.4. CITY			
TITLE	SD	DELETE	4.1 TITLE	Ĭ		Change Addition
NAME	BROWN, GARY		4. 2 NAM	-		
STREET ADDRESS	1000 N US 1		4.3 STRE	ET ADORESS		
CITY-ST-ZIP	JUPITER FL	T Dei ete	4.4 CITY			Change Addition
TITLE			5.1 TITLE	1		Change Addition
NAME DEDUCE ADDRESS	FISCHER, CHARLES 1000 N US 1		5.2 NAM			
STREET ADDRESS	JUPITER FL			ET ADDRESS		
CITY - ST - ZIP TITLE	D D	······································		-ST-ZIP		☐ Change ☐ Addition
NAME	DAVIS, JERRY		6.2 NAM	1		Strainge recontrol
STREET ADDRESS	100 N. US #1 EL 202			ET ADORESS		
CITY-ST-ZIP	JUPITER FL		6.4 CITY			
14. I do herel	by certify that the information supplier	d with this filing does not qualify	for the e	cemption st	ated in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatio	on indicated on this annual report or sufficer or director of the corporation or	upplemental annual report is tru the receiver or trustee empowe	red to ex	curate and ecute this re	that my signature shall have the same legal eport as required by Chapter 617, Florida S	il effect as if made under oath; that Statutes; and that my name