


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 21, 2004 8:00 am**  
**Secretary of State**

04-21-2004 90084 004 \*\*\*\*61.25

<b>DOCUMENT # N05632</b> 1. Entity Name <b>JUPITER HARBOUR CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>1000 N. US #1 JUPITER FL 33468-7446</b>			Mailing Address <b>1000 N US HWY 1 JA 600 JUPITER FL 33477 US</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number <b>59-2466078</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>JUPITER HARBOR, CONDO ASSOC. INC 1000 N. US HWY 1 POOL HOUSE JUPITER FL 33477</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BERNATH, STANLEY</b> <input type="checkbox"/> Delete <b>1000 N. US HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>PENDER, JERRY</b> <b>1000 N 'US HIGHWAY 1, JA 600</b> <b>JUPITER, FL 33477</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <input type="checkbox"/> Delete <b>GUIN, CLAUDETTE</b> <b>1000 N. U.S. HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input type="checkbox"/> Delete <b>FISCHER, ARLENE</b> <b>1000 N. U.S. HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input type="checkbox"/> Delete <b>HARMON, RON</b> <b>1000 N. US HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>HARMON, RON</b> <b>1000 N 'US HWY 1, JA 600</b> <b>JUPITER, FLORIDA 33477</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <input type="checkbox"/> Delete <b>SHARP, GEORGE</b> <b>1000 N. U.S. HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>FROST, BILL</b> <b>1000 N. U.S. HWY 1, JA 600</b> <b>JUPITER FL 33477</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: <i>Claudette Guinn</i> CLAUDETTE GUINN PRES APRIL 2, 2004 561 743.1293</b>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					