

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90112 036 ****61.25

DOCUMENT # N18113

1. Entity Name

THE SHORES OF JUPITER HOME OWNERS ASSOCIATION, I

JUPITER



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

POST OFFICE BOX 780
 PO BOX 780
 JUPITER FL 33468

POST OFFICE BOX 780
 PO BOX 780
 JUPITER FL 33468-0780

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2765983

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE, JAY S.
~~3300 PGA BLVD #500~~
 PALM BCH GRDNS FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)
 3300 PGA BLVD # 970

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HANNERS, DWIGHT	
STREET ADDRESS	6577 WOODLOCH CT	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	S	<input type="checkbox"/> Delete
NAME	REILLY, ANNE	
STREET ADDRESS	18631 MISTY LAKE DR	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SELZ, STEVE	
STREET ADDRESS	6405 WINDING LAKE DRIVE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAUDENBUSH, DIB	
STREET ADDRESS	17748 LOGLOLLY PINE COURT	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	D	<input type="checkbox"/> Delete
NAME	O'MAHONEY, EMILY	
STREET ADDRESS	18834 SWEET GUM CT	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	T	<input type="checkbox"/> Delete
NAME	PIVER, CHARLES	
STREET ADDRESS	18772 STILL LAKE DRIVE	
CITY-ST-ZIP	JUPITER FL 33458	

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DON RAUDENBUSH	
STREET ADDRESS	18849 LOGLOLLY PINE CT	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JIM CHORNIEM	
STREET ADDRESS	6210 WINDING LAKE DR.	
CITY-ST-ZIP	JUPITER, FL 33458	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN PETERSON	
STREET ADDRESS	6270 LONGLEAF PINE DR.	
CITY-ST-ZIP	JUPITER, FL 33458	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE:

[Handwritten Signature]

TREASURER
 CHARLES R. PIVER 24 FEB 2000

561-744-4955

CF12E037 (9/99)