## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N33491

(4)

## **FILED** Jan 30 1998 8:00am Secretary of State

THE PRESERVE AT JUPITER PROPERTY OWNERS' ASSOCIATION, INC.							
Principal Place of Business Mailing Address					- E IN UNITER #00 SYTEM THIS QUARTE	INING CIRT MINIT NING NING NING NING NING 1061	
107 JEANETTE WAY JUPITER FL 33458 US US 107 JEANETTE WAY JUPITER FL 33458 US					3. Date incorporated or Qualif 08/01/1989 4. FEI Number 65-0147169	Applied For Not Applicable	
2. Principal Place of Business 2a. Mailing Address						- 60.75	
21 26 POST OFFIC			CE B	ox ol	5. Certificate of Status Desired	58.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					6. Election Campaign Financin	·	
22					Trust Fund Contribution	Added to Fees	
23	· · · · · · · · · · · · · · · · · · ·			FL. 7. Is this nonprofit corporation a homeowners association?			
Zip	Country	zip 33468 -	Country		8. This corporation owes or ha	s paid the current year Intangible	
24	25  9. Name and Address of Curre	29   3	o PALI	M BE	Personal Property Tax due		
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of Nev	/ Hegistered Agent	
KNIIGHT	. DWND		82				
KNIGHT, DAVID 1645 PALM BEACH GARDENS BLVD # 100				Street A	t Address (P.O. Box Number is Not Acceptable)		
STE 1100							
WEST P	PALM BEACH FL 33401		84	City		85 Zip Code	
				•			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
12.		ID DIRECTORS	13.	ar agriatore		FFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		esident & Direc		
NAME	MARK TITUS	1.2 NA				, 802	
STREET ADDRESS	122 STILL LAKE DR.		1.3 STREET	ADDRESS	ul Chepurko O Still Lake Dı	35.770	
CITY-ST-ZIP	JUPITER FL		1.4 CITY - S'	T-ZIP	piter, Fl. 3345	<u> </u>	
TITLE	VPD	DELETE	2.1 TITLE		& Director	Change Addition	
NAME	KAYE MANCHL		2.2 NAME		clael Schwebel		
STREET ADDRESS	116 CASSILY WAY JUPITER FL		2.3 STREET	AUDRESS	7 Jeanette Way		
CITY-ST-ZIP TITLE	SD	₹ DELETE	2. 4 CITY - S 3.1 TITLE	11-Zir	<del>piter. Fl. 3345</del>	Change Addition	
NAME	GEORGE SPIVAK		3.2 NAME		bretsfw: & Treas	surer & Director	
STREET ADDRESS	118 CASSILLY WAY		3.3 STREET	ADDRESS	bert Tüschman		
CITY-ST-ZIP	Jupiter Fl		3.4. CITY-S	IT-ZIP	3 Casilly Way piter. Fl. 3345	38	
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY - ST - ZIP			4.4 CITY-ST	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME			5.2 NAME				
STREET ADORESS	<b>■</b> <sup></sup>		5.3 STREET	- 1			
CITY-ST-ZIP TITLE			5.4 CITY - ST 6.1 TITLE	1-ZIP		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST				
	ertify that the information supplied w	rith this filing does not qualify for the			ection 119.07(3)(i), Florida Statute	es. I further certify that the information	

required on one amount report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a 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 12 or Block 13 if changed, or on an attachment with an address.