

FILE NOW: FILING FEE IS \$61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44483 (8)

1. Corporation Name

THE ART PEOPLE OF JUPITER/TEQUESTA, INC.



Principal Place of Business

P O BOX 8481
BAY 41
JUPITER FL 33468
US

Mailing Address

P O BOX 8481
JUPITER FL 33468
US

3. Date Incorporated or Qualified
07/02/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 *No Location at this*
Suite, Apt. #, etc. *Time*

2a. Mailing Address

26 *PO Box 8481*

Suite, Apt. #, etc.

City & State

27 *Jupiter, FL*

Zip

28 *33468*

Country

29 *Palm Beach*

City & State

30 *Palm Beach*

Zip

31 *33468*

Country

32 *US*

4. FEI Number
65-0288344

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DAVERSA, JEFFREY N.
218 U.S. HIGHWAY ONE
SUITE 202
TEQUESTA FL 33469

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 **000001848930**

84 City

05/04/96 01009 018

*****61.25**

FL 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.

SIGNATURE *Ruth Hussey, Treas.*

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

Ruth Hussey, Treas.

(NOTE: Registered Agent signature required when amending)

4/15/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	ORDEN, BARABRA VAN	
STREET ADDRESS	1512 BERKSHIRE AVE	
CITY-ST-ZIP	JUPITER FL	
TITLE	VP	☒ DELETE
NAME	HOLLAND, JOHM	
STREET ADDRESS	107 B BENT ARROW DR	
CITY-ST-ZIP	JUPITER FL	
TITLE	S	☒ DELETE
NAME	ELSIE, REX	
STREET ADDRESS	3208 ROBBINS RD.	
CITY-ST-ZIP	POMPANO BCH. FL 33062	
TITLE	S	☒ DELETE
NAME	MOYER, BERT	
STREET ADDRESS	99 YACHT CLUB PLACE	
CITY-ST-ZIP	TEQUESTA FL	
TITLE	T	☐ DELETE
NAME	HUSSEY, RUTH	
STREET ADDRESS	231 SUNSET RD	
CITY-ST-ZIP	WEST PALM EBACH FL	
TITLE	T	☒ DELETE
NAME	CIARRA, SUSAN	
STREET ADDRESS	300 A VISION DR.	
CITY-ST-ZIP	PALM BCH. GARDENS FL 33418	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<i>D</i>	☐ Change ☐ Addition
1.2 NAME	<i>Pres</i>	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	<i>D</i>	☒ Change ☐ Addition
2.2 NAME	<i>1st VP</i>	
2.3 STREET ADDRESS	<i>Frank Robishaw</i>	
2.4 CITY-ST-ZIP	<i>761 Hummingbird Way #105</i>	
3.1 TITLE	<i>D</i>	☒ Change ☐ Addition
3.2 NAME	<i>2nd V.P.</i>	
3.3 STREET ADDRESS	<i>Dan Coon</i>	
3.4 CITY-ST-ZIP	<i>15221 S.W. Trail Terrace</i>	
4.1 TITLE	<i>D</i>	☒ Change ☐ Addition
4.2 NAME	<i>Recording Secy.</i>	
4.3 STREET ADDRESS	<i>Mary Ann Pickew</i>	
4.4 CITY-ST-ZIP	<i>19023 S.E. Jupiter River Dr.</i>	
5.1 TITLE	<i>D</i>	☐ Change ☐ Addition
5.2 NAME	<i>Jupiter, FL. 33458</i>	
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	<i>D</i>	☒ Change ☐ Addition
6.2 NAME	<i>Treas. Asst.</i>	
6.3 STREET ADDRESS	<i>Bob Tuttle</i>	
6.4 CITY-ST-ZIP	<i>13737 Blue Fox Place</i>	
	<i>Palm Beach Gardens, FL. 33418</i>	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ruth Hussey, Treas.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-96 107-832-5495

Date

Daytime Phone #

CR2E037 (12/95)