

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State
 02-19-2002 90036 046 ****61.25

DOCUMENT # N49121

1. Entity Name

JUPITER FARMS RESIDENTS, INC.

Principal Place of Business

Mailing Address

**11150 154TH RD NORTH
 JUPITER FL 33478
 US**

**P O BOX 2585
 JUPITER FL 33468
 US**

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

65-0358562

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

**RICE, EDWARD R
 11150 154TH RD NORTH
 JUPITER FL 33478**

Name

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

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: FEE 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 **VP** ☐ Delete
 NAME **HICKMAN, NICOLE**
 STREET ADDRESS **153609 118TH TERRACE N**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **President** ☒ Change ☐ Addition
 NAME **Judith Rice**
 STREET ADDRESS **11150 154th Rd N**
 CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **D** ☐ Delete
 NAME **RICE, JUDITH**
 STREET ADDRESS **11150 154TH ROAD N**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **Vice President** ☐ Change ☒ Addition
 NAME **Gary McEwen**
 STREET ADDRESS **11414 175th St N**
 CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **P** ☒ Delete
 NAME **CASHION, CLARENCE**
 STREET ADDRESS **17390 N 128TH TERR**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **Director** ☐ Change ☒ Addition
 NAME **John Bellamy**
 STREET ADDRESS **9477 Mockingbird Yr**
 CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **TD** ☐ Delete
 NAME **RICE, ED**
 STREET ADDRESS **11150 N 154TH RD**
 CITY-ST-ZIP **JUPITER FL**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Scott Hanley**
 STREET ADDRESS **16338 Alexander Run**
 CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **S** ☐ Delete
 NAME **TAYLOR, LOIS**
 STREET ADDRESS **17127 THUNDER ROAD**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **Director** ☐ Change ☒ Addition
 NAME **JAMES KYLE**
 STREET ADDRESS **13018 156th St N**
 CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **D** ☐ Delete
 NAME **MC EWEN, GARY**
 STREET ADDRESS **11414 175TH STREET NORTH**
 CITY-ST-ZIP **JUPITER FL 33478**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Sue Lopilato**
 STREET ADDRESS **16210 Jupiter Farms Rd**
 CITY-ST-ZIP **Jupiter, FL 33478**

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward R. Rice

7/30/02

Daytime Phone #

361-748-8486

CR2E037 (9/01)