2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

P.O. BOX 24-4666

DOCUMENT # N9400001403

1. Entity Name

Principal Place of Business

3876 JONATHANS WAY

JONATHANS GROVE HOMEOWNERS ASSOCIATION, INC.



FILED Jan 09, 2003 8:00 am Secretary of State

01-09-2003 90034 036 ****61.25

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3424-4666	

BOYNTON BEACH FL 33436 US				BOYNTON BEACH FL 33424-4666 US) (3 m)(1 m)		Aili Bolil Abit	3010 1 21032 01012 3	II II 1 1 1 1 1 1 1 1 1	
2. Principal Place of Business 3. N			3. Ma	. Mailing Address									
Suite, Apt. #, etc.			s	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES						
City & State				City & State			4. FEI Number 59-0323468 Applied For					\Box	
Zip Country Z				Country			Not Applicable S. Certificate of Status Desired					+	
	6. Name	and Address of Current	Register	ed Agent		ī —		7. Name and Ac	dress of New	Registere	•		\dashv
						Name			10,000 01 11011	riogistero	Agent		┨
CARROLL, BETTY 3802 JONATHANS WAY BOYNTON BEACH FL 33436				- -	Street Address (P.O. Box Number is Not Acceptable)								
					City				F	L Zip Coo		1	
the obligation SIGNATURE	and or registe	submits this statement for red agent.	or the purp	oose of changing its i	registere	ed office o	or registere	ed agent, or both, i	n the State of F	Florida. Lan	n familiar with	, and accept	7
	Signature, typed o	printed name of registered agent	and title if app	olicable. (NOTE:	Registered	d Agent signa	ture required	when reinstating)		DATE			
FILE NOW: FEE IS \$61.25							\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State					
10.		OFFICERS AND DIF	RECTORS		11.		A	DDITIONS/CHANG	J SES TO DEFIC	EBS AND C	IDECTORS IN	110	4
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TITLE	PD			☐ Delete	TITLE		-	.					46
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STREET ADDRESS	3876 JONA	THANS WAY			STREE	TADDRESS							
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STREET ADDRESS	3846 JONAT				STREE	ADDRESS	888 EA	ST COAST A	VE				
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NAME	CARROLL, E				NAME								
STREET ADDRESS	3802 JONAT				STREET	ADDRESS							
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IAME	1				NAME								
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12. I hereby certify that the information supplied with this filling 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

SIGNATURE:

1/6/03 561-586-3413