

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90022 013 \*\*\*\*61.25

**DOCUMENT # N94000005366**

1. Entity Name

CLARIDGE JUPITER ISLAND CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business

19950 BEACH RD  
JUPITER FL 33469

Mailing Address

19950 BEACH RD  
JUPITER FL 33469

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0533204

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

(MANAGER) RAIGUE, AL  
19950 BEACH RD  
TEQUESTA FL 33469

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME CUNNINGHAM, WILLIAM  
STREET ADDRESS 19950 BEACH RD 9SOUTH  
CITY-ST-ZIP TEQUESTA FL 33469

TITLE VD ☒ Delete  
NAME KOLDEN, JACK  
STREET ADDRESS 19950 BEACH RD 7NORTH  
CITY-ST-ZIP TEQUESTA FL 33469

TITLE D ☐ Delete  
NAME BOYLE, EMMETT  
STREET ADDRESS 19950 BEACH RD 3SOUTH  
CITY-ST-ZIP TEQUESTA FL 33469

TITLE D ☐ Delete  
NAME BAGWELL, SUE  
STREET ADDRESS 19950 BEACH RD 2NORTH  
CITY-ST-ZIP TEQUESTA FL 33469

TITLE D ☐ Delete  
NAME JEFFER, HERMAN  
STREET ADDRESS 19950 BEACH RD 8NORTH  
CITY-ST-ZIP TEQUESTA FL 33469

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*William W. Rague*

2-6-06

(561) 743-7244