

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

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90171 043 ****70.00

DOCUMENT # N95000005137

1. Entity Name
**JUNO BEACH INTRACOASTAL LANDINGS
HOMEOWNER'S ASSOCIATION, INC.**



Principal Place of Business
**1014 BAY COLONY DRIVE, SOUTH
JUNO BEACH, FL 33408**

Mailing Address
**1014 BAY COLONY DRIVE, SOUTH
JUNO BEACH, FL 33408**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**JUNO BAY INVESTMENTS INC.
1014 BAY COLONY DRIVE, SOUTH
JUNO BEACH, FL 33408**

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 registering.)

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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PTD	☐ Delete
NAME	VRBANEC, STEVE	
STREET ADDRESS	1014 BAY COLONY DRIVE, SOUTH	
CITY-ST-ZIP	JUNO BEACH, FL 33408	
TITLE	D	☐ Delete
NAME	STEFANICH, JAMES	
STREET ADDRESS	1014 BAY COLONY DRIVE, SOUTH	
CITY-ST-ZIP	JUNO BEACH, FL 33408	
TITLE	VPSD	☐ Delete
NAME	BLUEMKE, DUANE	
STREET ADDRESS	14246 PROVIDENCE LANE	
CITY-ST-ZIP	BROOKSFIELD, WI 53006	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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
NAME	
STREET ADDRESS	4585 HEWITT'S POINT ROAD
CITY-ST-ZIP	OCONOMOWOC, WI 53066-3314
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
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 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: *Steph M. [Signature]* **4/29/03** **561.625.3511**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)