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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # N95000005396 (5)

1. Corporation Name

THE FRIENDS OF JUPITER BEACH, INC.

Principal Place of Business	Mailing Address
P.O. BOX 791 JUPITER FL 33468-0791	P.O. BOX 791 JUPITER FL 33468-0791

3. Date Incorporated or Qualified: 11/14/1995
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 65-0625755 ☐ 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

TURNER, JOHN A ESQ
515 NORTH FLAGLER DRIVE, SUITE 600
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: ANITA LANKLER
82 Street Address (P.O. Box Number is Not Acceptable): 88 W. RIVERSIDE DR.
83
84 City: JUPITER FL 65 Zip Code: 33469

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: Anita Lankler, pres. DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LANKLER, ANITA		1.2 NAME		
STREET ADDRESS	88 W. RIVERSIDE DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33469		1.4 CITY-ST-ZIP		
TITLE	VSD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	TURNER, JOHN		2.2 NAME		
STREET ADDRESS	6515 E CHASEWOOD DR. N.		2.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	RAMSPACHER, DICK		3.2 NAME	RAMSPACHER, DICK	
STREET ADDRESS	1611 SIXTEENTH LN.		3.3 STREET ADDRESS	5394 POINTE LANE E.	
CITY-ST-ZIP	PALM BCH GARDENS FL 33418		3.4 CITY-ST-ZIP	JUPITER, FL 33458	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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 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: Anita Lankler RE ANITA LANKLER 4-9-97 (561) 745-0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0044166