

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005396

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE FRIENDS OF JUPITER BEACH, INC.

Current Principal Place of Business:

224 LONGSHORE DRIVE
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 791
JUPITER, FL 334680791

New Mailing Address:

FEI Number: 65-0625755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBONS, LYNNE
224 LONGSHORE DRIVE
JUPITER, FL 33478 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LANKLER, ALEXANDER
Address: 88 W. RIVERSIDE DR.
City-St-Zip: JUPITER, FL 33469

Title: D () Delete
Name: MELLEBY, PATRICIA
Address: 233 E RIVER PARK DR
City-St-Zip: JUPITER, FL 33477

Title: D () Delete
Name: JONES, GEOFF
Address: 128 VIA ROSINA
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: ROSS, JOAN
Address: 237 E. RIVER PARK DR.
City-St-Zip: JUPITER, FL 33477

Title: D () Delete
Name: GIBBONS, LYNNE
Address: 224 LONGSHORE DR.
City-St-Zip: JUPITER, FL 334582407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNNE GIBBONS

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date