

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90134 031 ****61.25

DOCUMENT # N95000005396

1. Entity Name
THE FRIENDS OF JUPITER BEACH, INC.



Principal Place of Business

P.O. BOX 791
JUPITER FL 33468-0791

Mailing Address

P.O. BOX 791
JUPITER FL 33468-0791

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0625755**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGLER, ANITA
88 W RIVERSIDE DR
JUPITER FL 33469

Name **ALEXANDER LANGLER**

Street Address (P.O. Box Number is Not Acceptable)

88 W RIVERSIDE DR

City

JUPITER

FL

Zip Code

33469

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 a registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

ALEXANDER LANGLER, DIRECTOR

4/30/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PTD** ☒ Delete
NAME **LANGLER, ANITA**
STREET ADDRESS **88 W. RIVERSIDE DR.**
CITY-ST-ZIP **JUPITER FL 33469**

TITLE **D** ☐ Change ☒ Addition
NAME **ALEXANDER LANGLER**
STREET ADDRESS **88 W. RIVERSIDE DR**
CITY-ST-ZIP **JUPITER FL 33469**

TITLE **VSD** ☐ Delete
NAME **TURNER, JOHN**
STREET ADDRESS **16586 HAYNIE LANE**
CITY-ST-ZIP **JUPITER FL 33478**

TITLE **D** ☐ Change ☒ Addition
NAME **JOAN ROSS**
STREET ADDRESS **237 E RIVER PARK DR**
CITY-ST-ZIP **JUPITER FL 33477**

TITLE **D** ☐ Delete
NAME **JONES, GEOFF**
STREET ADDRESS **222 MOCCASIN TRAIL NORTH**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE **D** ☐ Change ☒ Addition
NAME **LYNNE GIBBONS**
STREET ADDRESS **224 LONGSHORE DR**
CITY-ST-ZIP **JUPITER FL 33458-2407**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ***P/S/T** ☒ Change ☐ Addition
NAME **TURNER, JOHN**
STREET ADDRESS **16586 HAYNIE LANE**
CITY-ST-ZIP **JUPITER, FL 33478**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

ALEXANDER LANGLER **4/30/03** **561-748-8140**

CR2E037 (10/02)