

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003316

1. Entity Name

JUPITER FAITH FELLOWSHIP, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90167 022 ****61.25

Principal Place of Business

Mailing Address

12075 159TH CT N
JUPITER FL 33478
US

P.O. BOX 2813
JUPITER FL 33468-2813
US

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

65-0678440

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

SEGALLA, ROBERT J
12075 159TH ST N
JUPITER FL 33477

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SEGALLA, ROBERT J
STREET ADDRESS 2610 26TH CT.
CITY-ST-ZIP JUPITER FL

TITLE PD ☒ Change ☐ Addition
NAME Segalla, Robert J
STREET ADDRESS 12075 159th Ct N
CITY-ST-ZIP Jupiter, FL 33478

TITLE VPD ☐ Delete
NAME SEGALLA, CATHERINE E
STREET ADDRESS 2610 26TH CT.
CITY-ST-ZIP JUPITER FL

TITLE VPD ☒ Change ☐ Addition
NAME Segalla, Catherine E
STREET ADDRESS 12075 159th Ct N
CITY-ST-ZIP Jupiter, FL 33478

TITLE D ☐ Delete
NAME HEWITT, CHARLES E
STREET ADDRESS 2401 WINDER DR
CITY-ST-ZIP BRIDGEWATER NJ 08807

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

TITLE D ☒ Delete
NAME GUASTELLA, JOHN F
STREET ADDRESS 50 BEACH RD
CITY-ST-ZIP TEQUESTA FL 33469

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

TITLE D ☐ Delete
NAME WILLIAM, KERTESZ
STREET ADDRESS 704 PEMOCK SOUTH
CITY-ST-ZIP JUPITER FL 33458

TITLE D ☒ Change ☐ Addition
NAME William Kertes2, William
STREET ADDRESS 704 Pemock Ln S
CITY-ST-ZIP Jupiter, FL 33458

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:

Robert J. Segalla
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-00

561-744-8099

Date

Daytime Phone #

CR2E037 (9/99)