

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 27, 1999 8:00 am  
Secretary of State

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1. Corporation Name

ORGANIZATION OF PARENTS AND TEACHERS OF JUPITER  
FARMS COMMUNITY ELEMENTARY SCHOOL, INC.

Principal Place of Business

17400 HAYNIE LANE  
JUPITER FL

Mailing Address

17400 HAYNIE LANE  
JUPITER FL



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/29/1997

4. FEI Number

59-3465610

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

WHALEN, TIMOTHY L  
301 CLEMATIS STREET  
SUITE 200  
WEST PALM BEACH FL

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME WHITTEN, PERRIE  
STREET ADDRESS 15702 113TH TRAIL N  
CITY-ST-ZIP JUPITER FL 33478

TITLE PD ☒ DELETE  
NAME EPTER, JOANNE  
STREET ADDRESS 16286 MELLEEN LANE  
CITY-ST-ZIP JUPITER FL 33478

TITLE S ☐ DELETE  
NAME LISA MARTZ  
STREET ADDRESS 17400 HAYNIE LN  
CITY-ST-ZIP JUPITER FL 33478

TITLE T ☐ DELETE  
NAME JOANNE EPTER  
STREET ADDRESS 16286 MELLEEN LN  
CITY-ST-ZIP JUPITER FL 33478

TITLE D ☐ DELETE  
NAME JEAN NUNN  
STREET ADDRESS 121ST TERR  
CITY-ST-ZIP JUPITER FL 33478

TITLE VP ☐ DELETE  
NAME SHELLEY SAYRE  
STREET ADDRESS 12737 189TH CT N  
CITY-ST-ZIP JUPITER FL 33478

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

CR2E037 (1/98)