

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004954

1. Entity Name

JUPITER-TEQUESTA-JUNO BEACH CHAMBER OF COMMERCE
FOUNDATION, INC.

Principal Place of Business

Mailing Address

800 NORTH US HWY ONE
JUPITER FL 33477

800 NORTH US HWY ONE
JUPITER FL 33477

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

65-0784996

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

MURTAUGH, LOUISE
800 NORTH US HWY ONE
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 ☐ Delete
NAME D
STREET ADDRESS HEARD, BRUCE
CITY-ST-ZIP 1210 S DIXIE HWY
JUPITER FL 33458

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MURTAUGH, KRISTEN
CITY-ST-ZIP 5353 PARKSIDE DRIVE
JUPITER FL 33458

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MURPHY, WILLIAM
CITY-ST-ZIP 2121 S. ALTERNATE A1A
JUPITER FL 33477

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

TITLE ☒ Delete
NAME D
STREET ADDRESS GIBA, JOHN
CITY-ST-ZIP 222 S. US HWY ONE, #213
TEQUESTA FL 33469

TITLE ☐ Change ☒ Addition
NAME Nelson, Gail
STREET ADDRESS 340 OCEAN DRIVE
CITY-ST-ZIP Two Beach, FL 33408

TITLE ☐ Delete
NAME DT
STREET ADDRESS DENT, PATTY
CITY-ST-ZIP 101 N. US HWY ONE
TEQUESTA FL 33459

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

TITLE ☐ Delete
NAME P
STREET ADDRESS HOYLA, ROBERT
CITY-ST-ZIP 4302 S US HWY ONE
JUPITER FL 33477

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91732 027 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)