

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000477

FILED  
Apr 07, 2010  
Secretary of State

Entity Name: J.P.O. CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

1300 PINETREE DRIVE  
9  
INDIAN HARBOUR BEACH, FL 32937

## New Principal Place of Business:

1345 HIGHWAY A1A  
INDIANLANTIC, FL 32903

## Current Mailing Address:

1300 PINETREE DRIVE  
9  
INDIAN HARBOUR BEACH, FL 32937

## New Mailing Address:

C/O DEPENDABLE PROPERTY MANAGEMENT, LLC  
1680 HIGHWAY A1A, STE 1  
SATELLITE BEACH, FL 32937

FEI Number: 59-3488462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEPENDABLE PROPERTY MANAGEMENT, LLC  
1300 PINETREE DRIVE  
9  
INDIAN HARBOUR BEACH, FL 32937 US

## Name and Address of New Registered Agent:

DEPENDABLE PROPERTY MANAGEMENT, LLC  
1680 HIGHWAY A1A  
SUITE 1  
SATELLITE BEACH, FL 32937 US

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: ANGELA M. PHILLIPS

04/07/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: CAMERUCI, SHERRA  
Address: 1345 N. HWY A1A #605  
City-St-Zip: INDIALANTIC, FL 32903

Title: T  
Name: SUTTON, JIM  
Address: 1345 N. HWY. A1A #508  
City-St-Zip: INDIALANTIC, FL 32903

Title: S  
Name: POTTS, SYBIL  
Address: 1345 N. HWY A1A, #405  
City-St-Zip: INDIALANTIC, FL 32903

Title: VP  
Name: DONNELLY, BOB  
Address: 1345 N. HWY A1A #208  
City-St-Zip: INDIALANTIC, FL 32903

Title: P  
Name: JORGENSEN, AL  
Address: 1345 N. HWY A1A #507  
City-St-Zip: INDIALANTIC, FL 32903 US

I hereby 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 all other like empowered.

SIGNATURE: AL JORGENSEN

P

04/07/2010

Electronic Signature of Signing Officer or Director

Date