2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002718

FILED Apr 21, 2009 Secretary of State

Entity Name: JUPITER YACHT CLUB MASTER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

24301 WALDEN CENTER DR 11784 WEST SAMPLE ROAD

SUITE 300 #103

BONITA SPRINGS, FL 34134 US CORAL SPRINGS, FL 33065 US

Current Mailing Address: New Mailing Address:

8409 N MILITARY TRL STE 123 11784 WEST SAMPLE ROAD

C/O CHERRY EDGAR & SMITH, PA #103

PALM BEACH GARDENS, FL 33410 US CORAL SPRINGS, FL 33065 US

FEI Number: 65-0835093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASTINGS, VIVIEN N 24301 WALDEN CENTER DR SUITE 300 BONITA SPRINGS, FL 34134 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:

The America Circumstance of Designature of America

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change()Addition

 Name:
 PARATORE, LOU
 Name:

 Address:
 24301 WALDEN CTR DR
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34134
 City-St-Zip:

Title: STD () Delete Title: TDSD (X) Change () Addition

Name: TIEBOUT-TOUURON, MARCIENNA Name: SCHUMAKER, JAMES

Address: 24301 WALDEN CENTER DRIVE Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD () Delete Title: VPD (X) Change () Addition

Name:PERTCHICK, JONATHANName:PATRIZIO, MICHAELAddress:24301 WALDEN CTR DRAddress:24301 WALDEN CTR DRCity-St-Zip:BONITA SPRINGS, FL 34134City-St-Zip:BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY LOU PALMER AGT 04/21/2009