2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)						FILED Mar 09, 2004 8:00 am				
DOCU 1. Entity Narr	# N9800000	3838	<i>A</i>			Secretary of State 03-09-2004 90017 014 ****61.25				
JUPITER VILLAGE PHASE IV CABLE CLUB, INC.							09-2004 90017 01	4 01.23		
· Principal Plac	e of Busines	3	Mailing Address	Mailing Address		-				
127 DEERFIELD DRIVE JUPITER FL 33458 US			P.O. BOX 1781 JUPITER FL 33458 US	JUPITER FL 33458						
2. Principal P	lace of Busin	ess	3. Mailing Address	3. Mailing Address			MOORE CR2E037 (11/03)			
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.						
City & Stat	e		City & State	City & State		4. FEI Number	65-0851051	· · · ·	oplied For ot Applicable	
Zip	Country		Zip	Country		5. Certificate of S	Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
127		LD DRIVE	-	Street	rreet Address (P.O. Box Number is Not Acceptable)					
JUP	ITER FL 3	3458		City				7.00		
			ent for the purpose of changing its							
SIGNATURE ·	Signature, typed	or printed name of registered : FEE IS \$61.25 May 1, 2004		Registered Agent sign apaign Financing contribution.		(when reinstating) \$5.00 May Be Added to Fees	DAT Make Chu Florida Dep	E Eck Payable Partment of S	to State	
10.	IDPC	OFFICERS AN		11.		ADDITIONS/CHANC	GES TO OFFICERS AND	DIRECTORS IN	l 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GOLLINGS	, Robert H Tield Drive L 33458	🗋 Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP				Change Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JAMASON 8259 N MH WEST-PAL		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV En 13 TU	ILY S. FR 7 DEERFIL PITER H	ELD DRIVE	Change	X Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	DS FRANKLIN 127 DEERF JUPITER FI		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET ADDRESS CITY - ST- ZIP		n		Change	Addition	
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 usepe 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 oddress, with all other the empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Dat										