

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164502

FILED
May 01, 2006
Secretary of State

Entity Name: CLARIDGE JUPITER ISLAND REALTY, INC.

Current Principal Place of Business:

250 TEQUESTA DR STE 200
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

250 TEQUESTA DR STE 200
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 20-4790726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RUTLAND, LEONARD JR.
759 S FEDERAL HWY STE 303
STUART, FL 34994 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOYLE, EMMETT
Address: 19950 BCH RD 3S
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: JEFFER, HERMAN
Address: 19950 BCH RD 8N
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: KOLDEN, JACK
Address: 19950 7N
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: BAGWELL, SUE
Address: 19950 2N
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: CUNNINGHAM, WILLIAM
Address: 19950 PENTHOUSE S
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A CIOFFI

VP

05/01/2006

Electronic Signature of Signing Officer or Director

Date