

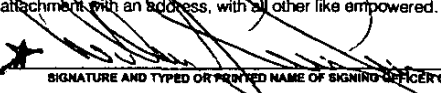


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90033 036 ***150.00

DOCUMENT # P05000164502 1. Entity Name CLARIDGE JUPITER ISLAND REALTY, INC.					
Principal Place of Business 250 TEQUESTA DR STE 200 TEQUESTA, FL 33469			Mailing Address 250 TEQUESTA DR STE 200 TEQUESTA, FL 33469		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 20-4790726			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent RUTLAND, LEONARD JR. 759 S FEDERAL HWY STE 303 STUART, FL 34994			7. Name and Address of New Registered Agent Name WILLIAM CUNNINGHAM Street Address (P.O. Box Number is Not Acceptable) 19950 BEACH ROAD 9 SOUTH City TEQUESTA FL Zip 33469		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  2-5-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete <input type="checkbox"/>	
	D	BOYLE, EMMETT	19950 BCH RD 3S TEQUESTA, FL 33469		
	D	JEFFER, HERMAN	19950 BCH RD 8N TEQUESTA, FL 33469		
	D	KOLDEN, JACK	19950 7N TEQUESTA, FL 33469		
	D	BAGWELL, SUE	19950 2N TEQUESTA, FL 33469		
	D	CUNNINGHAM, WILLIAM	19950 PENTHOUSE S TEQUESTA, FL 33469		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  2-5-07 (561) 743-7244 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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