


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000077531 1. Entity Name JUPITER BAY TENNIS, INC.	
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Principal Place of Business 353 S US HWY ONE JUPITER, FL 33477 US	Mailing Address 353 S US HWY ONE JUPITER, FL 33477 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ROBERT F PERRIN 102 EGAN FUSKEE STREET JUPITER, FL 33477	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000090592 03/17/04-80025-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PERRIN, ROBERT F 102 EGANFUSKEE STREET JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PERRIN, MARY LOU 102 EGANFUSKEE ST JUPITER, FL 33477
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**DO NOT WRITE
IN THIS SPACE**

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 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: *Robert F Perrin* **3/13/04 (561) 748-8656**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #