

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90013 005 ***150.00

0398619 AV

DOCUMENT # P98000051218

1. Entity Name

JUPITER ASSET MANAGEMENT, INC.

Principal Place of Business

~~1001 NORTH US HIGHWAY 1 SUITE 810~~
~~JUPITER FL 33477~~
 14155 U.S. Highway One, Ste 304
 Juno Beach, FL 33408

Mailing Address

~~1001 NORTH US HIGHWAY 1 SUITE 810~~
~~JUPITER FL 33477~~
 14155 U.S. Highway One, Ste 304
 Juno Beach, FL 33408

2. Principal Place of Business

14155 U.S. Highway One

Suite, Apt. #, etc.

Ste 304

City & State
 Juno Beach, FL

Zip
 33408

Country
 USA

3. Mailing Address

14155 U.S. Highway One

Suite, Apt. #, etc.

Ste 304

City & State
 Juno Beach FL

Zip
 33408

Country
 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0843179

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ANDREWS, JAMES B

1001 NORTH US HIGHWAY 1

SUITE 810

JUPITER FL 33477

*same agent,
 new address*

7. Name and Address of New Registered Agent

Name

Andrews, James B.

Street Address (P.O. Box Number is Not Acceptable)

14155 US Highway One

Ste 304

City **Juno Beach**

FL

Zip Code
33408

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.

SIGNATURE

[Signature]
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/18/02

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	ANDREWS, JAMES B	
STREET ADDRESS	1001 NORTH US HIGHWAY 1 SUITE 810	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Andrews, James B	
STREET ADDRESS	14155 US Highway One, Ste 304	
CITY-ST-ZIP	Juno Beach, FL 33408	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/02

(561) 630-6170

CR2E034 (9/01)