

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90038 042 ***150.00

DOCUMENT # **P99000017937** ✓

1. Entity Name

The CHOP House of Jupiter Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6791 INDIAN TOWN ROAD

Suite, Apt. #, etc.

3. Mailing Address

10813 EGRET POINTE LANE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Jupiter, FL

Zip

33458

Country

City & State

West Palm Beach, FL

Zip

33412

Country

4. FEI Number

65-0905141

Applied For

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

COURVOYER, Stephen

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

10813 EGRET POINTE LANE

City

West Palm Beach

FL

Zip Code

33412

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

Stephen Courvoyer

Stephen Courvoyer

4/26/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
COURVOYER, Stephen
10813 EGRET POINTE LANE
WPB, FL 33412**

TITLE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen Courvoyer - President Stephen Courvoyer

April 26th 2002

561-6251537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)