

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murnham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S70725** (4)

1. Corporation Name

THE JUPITER SCENERY COMPANY, INC.



Principal Place of Business

**603 COMMERCE WAY W
JUPITER FL 33458**

Mailing Address

**603 COMMERCE WAY W
JUPITER FL 33458**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/05/1991

3a. Date of Last Report

04/03/1995

4. FEI Number

65-0281929

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**NORMANDE, STEVEN J.
603 COMMERCE WAY W
JUPITER FL 33458**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and block applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**P
NORMANDE, STEVEN J
603 COMMERCE WAY W
JUPITER FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**TD
NORMANDE, STEVEN J.
603 COMMERCE WAY W
JUPITER FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**VPD
NORMANDE, SAMUEL C
603 COMMERCE WAY WEST
JUPITER FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**VP
NORMANDE, JAMES K
603 COMMERCE WAY WEST
JUPITER FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**S
NORMANDE, JEAN L
603 COMMERCE WAY WEST
JUPITER FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

4/1/96

407-743-7367

Daytime Phone #

CR2E034 (12/95)