


FILE NOW: FILING FEE IS \$61.25

FILED

**Jan 30 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736649 (5)
 1. Corporation Name
PIPERS GLEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business C/O GMC, INC 4175 E BAY DR #205 CLEARWATER FL 34624 33764	Mailing Address C/O GMC, INC 4175 E BAY DR #205 CLEARWATER FL 34624 33764
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3. Date Incorporated or Qualified 08/23/1976		
4. FEI Number 59-1689312	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 33764	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 33764
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9. Name and Address of Current Registered Agent
**HIRSHBERG, ROBIN
1574 GLEN COURT
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	HIRSHBERG, ROBIN 1574 GLEN CT. DUNEDIN FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	Same
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE D	BEETIE, VIVIAN 1584 HEATHER CT DUNEDIN FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	VIVIAN Beetie
STREET ADDRESS		2.3 STREET ADDRESS	1584 Heather Ct
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Dunedin, FL 34698
TITLE TD	WINDER, SIDNEY 1595 AMBERLEA DR S DUNEDIN FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	Same
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE S	ORLANDO, LAVRIE 1558 GLEN CT DUNEDIN FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Helen Schaff Mex
STREET ADDRESS		4.3 STREET ADDRESS	1572 Glen Ct
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Dunedin, FL 34698
TITLE D	MACLEAN, BILL 1599 AMBERLEA DR S DUNEDIN FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	ROBERTA JASKULSKI
STREET ADDRESS		5.3 STREET ADDRESS	1571 AMBERLEA DR
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE D	SUFUTO, PHIL 1566 GLEN CT DUNEDIN FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **ROBIN HIRSHBERG** **1/19/98** **733-6543**

CR2E037 (10/97)