FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED	
May 06 1998 8:00ai	m
Secretary of State	

DOCU 1. Corporation	MENT # 745149	(5)									
VILLAGE OF PEPPERTREE ASSOCIATION, INC.											
Principal Plac	e of Business	Mailing Address		***		ı	, 100kil 18011 91001 84101 11611 1			HEN GIBN HEAF	
23123 STATE	ROAD 7	% R.M.S. UNO.				3 Dete	Incorporated or Qualifi	ori		 	
#350-A P.O. BOX 970669 BOCA RATON FL 33427 0069 BOCA RATON FL 33427 0069							12/06/1978	90			
חטואו אפעט	re some	BECH HATON PL 33497-008	,			4. FELL			A	pplied For	
6 Dinainal F	None of D. share	1 4. 12 (6					5 9-1894221		N	ot Applicable	
2. Principal P	Place of Business	2e. Malling Address				5. Certi	ificate of Status Desired			Additional leguired	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					tion Campaign Financin	_	\$5.00		
22	MANAGEMENT GROUP, INC	PRINE MANAGE	EMENT	GROUI	P. 1N		t Fund Contribution		Added 1		
23 6300	PARK OF COMMERCE BLVD.	6300 PARK OF	F COMME	RCE BLV	'D. [TT: IS TH	is nonprofit corporation	a nomeown	ers association	Yn'r	
	CA RATON, FL 33487 ,8290	Zip BOCA RATON	1-16-836	87-829 0	•	8. This	corporation owes or ha	s paid the c		tangible	
24	26		ю				onal Property Tax due			□Ño	
	9. Name and Address of Current F	legistered Agent	81	Name		10. Nam	e and Address of New		d Agent		
DN ONE	BI, GARY >					1E	HANGBEL	4			
% R.M.C			82	Street A	ddres	s (P.O.	ox Number in Not Acce	ptáble) I <i>AA BAC</i>	E BL	η υ	
23123 §	PACE ROAD 7, #350-A PRIME N	IANAGEMENT GROUP PARK OF COMMERCE BLY	P, INE	~	ini		14NHG EMR	_	Sec.		
BUCAH	MION RE 00720	A RATON, FL 33487-8 29	_ [Cinc	کمو	<u>-</u>	-ATON	E		Code	
11. Pursuant		•		e-named o	COLDOL	ation sub		ne purpose	of changing i	is registered	
office or r	to the provisions of Sections 617.0502 a registered agent, or both, in the State of im familiar with and accept the obligation	Florida, Such change was au	thorized by	the corpo	oration	's board	of directors. I hereby a	cept the a	ppointment as	registered	
SIGNATURE	David A		24/1	D H	M R	EBE	R/m	4//	4/95		
	Signature, typed or printed name of registered agent a	nd litle if applicable. (NOTE: I	Registered Age			when reinstal	ting)	DATE	· / · <u>B</u>		
12.	OFFICERS AND I	DIRECTORS	13.			ADDIT	IONS/CHANGES TO O	FFICERS A			
TITLE NAME	DP SUDOCK, MAYER	CIR DECEIE	1.1 TITLE	-	D		e		☐ Change	Addition	
STREET ADDRESS	19874 SAWGRASS DRIVE, #610	11	1.2 NAME 1.3 STREET	ADDRESS	V	NEE	SANTUCE	Donald	c #	.	
CITY-ST-ZIP	BOCA RATON FL 33434	, •	1.4 CITY - S		- 1	Back	SANTULL SAWGRASS RATON FO	22	Wall	07-	
TITLE	96 08	☐ DELETE	2.1 TITLE	11-211				- 00	Change	Addition	
HAME	CHARWAT, ARTHUR		2.2 NAME	- 1							
STREET ADDRESS	19674 SAWGRASS DRIVE, #610	2	2.3 STREET	ADDRESS							
CITY-ST-ZIP	BOCA RATON FL 33434		2. 4 CITY - 9	ST-ZIP							
TITLE	DT	☐ DELETE	3.1 TITLE						Change	Addition	
NAME	KASTON, ISABEL	_	3.2 NAME								
STREET ADDRESS	20040 SAWGRASS LANE, #440	2	3.3 STREET	ADDRESS							
CITY-ST-ZIP TITLE	BOCA RATON FL 33434	☐ DELETE	3.4. CITY-5	ST-ZIP					Chares	T Addition	
NAME	GREENBERG, ROBERT	□ berrie	4.1 TITLE 4. 2 NAME						L Change	Addition	
STREET ADDRESS	19790 SAWGRASS DRIVE, #360	11	4.2 NAME 4.3 STREET	Anneces							
CITY-ST-ZW	BOCA RATON FL 33434	•	4.4 CITY-S								
TITLE	D	DELETE	5.1 TITLE			··· - · · · ·			Change	Addition	
NAME .	SANDS, WALTER		5.2 NAME	ļ							
STREET ADDRESS	19880 SAWGRASS LANE, #390	1 ·	5.3 STREET	ADDRESS							
CITY-ST-ZIP	BOCA RATON FL 33434		5.4 CITY - S	T-ZIP							
TITLE		☐ DELETE	6.1 TITLE						Change	Addition	
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET	t t							
CITY-ST-7IP			SACITY_C	T 200							

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 of 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 a value of the corporation of the corporatio