

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761419

FILED
Mar 31, 2009
Secretary of State

Entity Name: PEPPERWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

100 PEPPERWOOD COURT
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

100 PEPPERWOOD COURT
DAYTONA BEACH, FL 32119

New Mailing Address:

FEI Number: 59-2356377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUTCH, DEAN
100 PEPPERWOOD COURT
DAYTONA BEACH, FL 32119 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRUTCH, DEAN
Address: 100 PEPPERWOOD CT.
City-St-Zip: DAYTONA BEACH, FL

Title: DT () Delete
Name: LICCIARDELLO, SANTORO
Address: 110 PEPPERWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: VD () Delete
Name: WIGGINS, SUZANNE
Address: 132 PEPPERWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: O'NEILL, MOLLY
Address: 140 PEPPERWOOD CT
City-St-Zip: DAYTONA BEACH, FL

Title: D () Delete
Name: LICCIARDELLO, CONNIE
Address: 110 PEPPERWOOD CT.
City-St-Zip: DAYTONA BCH, FL

Title: SD () Delete
Name: HOLL, PETER G
Address: 120 PEPPERWOOD CT
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANTORO LICCIARDELLO

DT

03/31/2009

Electronic Signature of Signing Officer or Director

Date