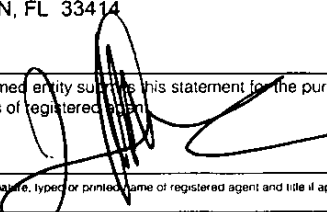
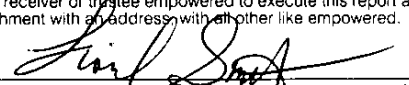


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90042 043 ****61.25

DOCUMENT # N04000011940 1. Entity Name PIPER'S CAY ASSOCIATION, INC.					
Principal Place of Business WELLINGTON MANAGEMENT 3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414			Mailing Address WELLINGTON MANAGEMENT 3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01072008 Chg-NP CR2E037 (12/06)	
4. FEI Number 02-0704162				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEWSOME, JOHN WELLINGTON MANAGEMENT, INC 3461-B FAIRLANE FARMS RD WELLINGTON, FL 33414			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE <u>1-11-08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEPHENS, TODD 4227 NORTHLAKE BOULEVARD PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KAREN BRUNSMAN 983 PIPER'S CAY DRIVE WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHITE, TODD 4227 NORTHLAKE BLVD PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ORLANDO SOSA 901 PIPER'S CAY DRIVE WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MAC ARTHUR, MICHAEL 4277 NORTHLAKE BOULEVARD PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LIONEL SMITH 825 PIPER'S CAY DRIVE WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS SERRICK 918 PIPER'S CAY DRIVE WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDA TADOED 800 PIPER'S CAY DRIVE WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with another like empowered.					
SIGNATURE:  DATE <u>1/14/08</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					