

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770536

**FILED**  
**Mar 28, 2014**  
**Secretary of State**  
**CC8836939804**

**Entity Name:** PIPERS WAITE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

16 CHURCH STREET  
OSPREY, FL 34229

**Current Mailing Address:**

16 CHURCH STREET  
OSPREY, FL 34229 US

**FEI Number:** 59-2344285

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TABAR, KARL  
5658 PIPERS WAITE  
SARASOTA, FL 34235 US

*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

**Officer/Director Detail :**

Title SD  
Name TABAR, KARL  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title VP  
Name STUTMAN, HERB  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title D  
Name BABINEAU, MELANIE  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title TD  
Name WU, JIM  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title PD  
Name HALLERDIN, KINGSLEY  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title D  
Name ROBBINS, DICK  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

Title DIRECTOR  
Name SWARTZBAUGH, TED  
Address 16 CHURCH STREET  
City-State-Zip: OSPREY FL 34229

*I hereby 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 all other like empowered.*

**SIGNATURE:** KARL TABAR

**SECRETARY**

**03/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date