FILED May 17, 2005 8:00 am Secretary of State 05-17-2005 90017 007 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 685860 1. Entity Name PIPER PROPERTIES, INC. Principal Place of Business % BERNARD J LECHNER 2115 RANGE RD CLEARWATER, FL 33765 US 2. Principal Place of Business Suite, Apt. #, etc.		Mailing Address % BERNARD J LECHNER 2115 RANGE RD CLEARWATER, FL 33765 US 3. Mailing Address Suite, Apt. #, etc. City & State				05132005	Chg-P		00528	1851 11 1881
City & State Zip Country		Zip Count		у		59-203		d 🗆	\$8.75 Add	t Applicabl
•	6. Name and Address of Current	Registered Agent			7. Name and	Address of Ne	w Registered	Fee Require	<u> </u>	
2115 RANG	, BERNARD J	neglative 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.									and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finance Trust Fund Contribution.						00 May Be ed to Fees	In accordance corporation of	ce with s. 60 did not rece	07.193(2)(b), ive the prior i	F.S., the notice.
10.	OFFICERS AND		11. TITLE	T	D.D.	ADDITIONS/	CHANGES TO (OFFICERS A		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIPER, WALTER 1948 BELLEAIR ROAD CLEARWATER, FL 33764	DAD		ME Pip REET ADDRESS 116		er, Wal 8 Tooke	es Rd	3468	[ing] Change	☐ Additio:
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD WILDER, SUZANNE P 1338 PRESERVATION WAY OLDSMAR, FL 34677	☐ Delete		T ADDRESS ST-ZIP		pon , o p)ES/ FL	3-100	☐ Change	Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PIPER, SCOTT 1948 BELLEAIR RD CLEARWATER, FL 33764	☐ Delete			211	er, Sco 5 Range	e Rđ	22765	反 Change	☐ Additio
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Cle	arwater	r, FL .	33765	☐ Change	☐ Additio
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oclete							☐ Change	Addition

12. 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.