

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 685860

1. Entity Name
PIPER PROPERTIES, INC.



Principal Place of Business

% BERNARD J LECHNER
2115 RANGE RD
CLEARWATER, FL 33765 US

Mailing Address

% BERNARD J LECHNER
2115 RANGE RD
CLEARWATER, FL 33765 US



04112006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2031422

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LECHNER, BERNARD J
2115 RANGE RD
CLEARWATER, FL 33765

**DO NOT WRITE
IN THIS SPACE**

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 _____

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
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PIPER, WALTER
STREET ADDRESS 1168 TOOKES RD
CITY-ST-ZIP TARPON SPRINGS, FL 34689

TITLE VTD
NAME WILDER, SUZANNE P
STREET ADDRESS 1338 PRESERVATION WAY
CITY-ST-ZIP OLDSMAR, FL 34677

TITLE S
NAME PIPER, SCOTT
STREET ADDRESS 2115 RANGE RD
CITY-ST-ZIP CLEARWATER, FL 33765

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000512697
04/29/06-20099-023 150.00

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter Piper

4-11-06

(727) 447-0323

Date

Daytime Phone #