

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006 8:00 am
Secretary of State

03-07-2006 90005 050 ****70.00

DOCUMENT # 727016 1. Entity Name PIPER TEN CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O COMMUNITY ACCTG & MGMT 40347 US 19 N STE 129 TARPON SPRINGS, FL 34689-841 US				Mailing Address C/O COMMUNITY ACCTG & MGMT 40347 US 19 N STE 129 TARPON SPRINGS, FL 34689-841 US	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2140546	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SPOONSTER, JANET K C/O COMMUNITY ACCOUNTING & MANAGEMENT INC 4037 US 19 N SUITE 129 TARPON SPRINGS, FL 34689				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		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	VD BOBER, TODD ☒ Delete 423 S PAULA DR #301 DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DEICHMAN, GREG ☐ Change ☒ Addition 155 CARLYLE DR PALM HARBOR, FL 34683	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARDNER, PAMELA ☒ Delete 423 S PAULA DRIVE # 205 DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARMAGOST, SUE ☐ Change ☒ Addition 1854 JENIFER ST MADISON, WI 53704-5525	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ELWOOD, HOWARD ☐ Delete 4235 S. PAULA DR, #104 DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BOYD, ROBERT ☐ Delete 423 S. PAULA DR, #302 DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BARNARD, PATRICIA ☐ Delete 423 S. PAULA DR, #203 DUNEDIN, FL 34698		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 all other like empowered.					
SIGNATURE: <i>Robert R Boyd</i> 3/3/06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					