

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739092

FILED  
Apr 02, 2009  
Secretary of State

**Entity Name:** PEPPERWOOD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

% THE CONTINENTAL GROUP  
11981 SW 144 CT., STE. 201  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

% THE CONTINENTAL GROUP  
11981 SW 144 CT., STE. 201  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 59-1807394      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
SUITE C-207  
FT. LAUDERDALE, FL 33312 US

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

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

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: SUGARMAN, CARL  
Address: 9285 SW 78TH CT  
City-St-Zip: MIAMI, FL 33156

Title: VP ( ) Delete  
Name: DARLOW, MARTIN  
Address: 9265 SW 78TH CT  
City-St-Zip: MIAMI, FL 33156

Title: PD ( ) Delete  
Name: COLEMAN, PHILLIP  
Address: 9013 SW 78 PLACE  
City-St-Zip: MIAMI, FL 33156

Title: TD ( ) Delete  
Name: ELIAS, HERBERT  
Address: 9030 SW 78TH CT  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: MORRISON, ROBERTA  
Address: 9235 SW 78TH CT  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PHILLIP COLEMAN

P

04/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date