2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# 758627

Entity Name: PIPER'S BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3401 E. LAMPP RD.
C/O MRS. OBERLE
PLANT CITY, FL 33565 US

New Principal Place of Business:

Current Mailing Address:

3401 E. LAMPP RD.
C/O MRS. ELLEN OBERLE
PLANT CITY, FL 33565 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OBERLE, ELLEN MRS.
3401 E LAMPP RD
PLANT CITY, FL 33565 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: STD ( ) Delete
Name: OBERLE, ELLEN MRS.,
Address: 3401 E. LAMPP RD.
City-St-Zip: PLANT CITY, FL

Title: D ( ) Delete
Name: DRUCKER, MITCH
Address: ONE SUFFOLK SQ. SUITE 500
City-St-Zip: ISLANDIA, NY 11749

Title: VP ( ) Delete
Name: STUMPE, JODY
Address: 19843 GULF BLVD APT 3
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D ( ) Delete
Name: MINERVA, BILL
Address: 126 S. HILLSIDE ACE
City-St-Zip: NESCONSET, NY 11767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: OBERLE, ELLEN MRS.,
Address: 3401 E. LAMPP RD.
City-St-Zip: PLANT CITY, FL 33565

Title: D (X) Change ( ) Addition
Name: ZERBE, DOUG,
Address: 20655 LONGLEAF PINE AVE
City-St-Zip: TAMPA, FL 33647

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: ELLEN OBERLE STD 01/07/2009
Electronic Signature of Signing Officer or Director — Date