2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #758950

1. Entity Name

FILED May 03, 2007 8:00 am Secretary of State

04-06-2007 90027 007 ****61.25

PEPPER	TREE CIVIC ASSOCIATIO	N, INC.							
Principal Plac 221 MADEIR ORLANDO, F		Mailing Address 509 S. CHICKASAW PMB-219 ORLANDO, FL 328.			1 10 km 10 60 f Culti	66017			AISHARA BATTON
		3. Mailing Address 509 S. (
<i>P</i>		Suite, Apt. *, etc. PMB 29	MB 291		04022007 C	hg-NP	CR2E	37 (12/06)
City & Stat	e	Orlando	Floria	la	4. FEI Number 59-211352	3		<u> </u>	Applied For Not Applicable
Zip	Country	3 <u>7</u> 82≤	Country	_	5. Certificate of St	ztus Desired		\$8.75 A Fee Requi	
	6. Name and Address of Curren	t Registered Agent	Name		7. Name and Add	ress of New I	Registered	Agent	· · · · · · · · · · · · · · · · · · ·
	IAN, GEORGE S					<u> </u>			
	EIRA DRIVE D. FL 32825		Street Address (P.O. Box Number is I	Not Acceptable	(e) 		
			City				FI	Zip Co	ode
8. The above the obligat	named entity submits this statement fillions of registered agent.	or the purpose of changing	g its registered office	or register	red agent, or both, in	the State of Fi	orida. I arr	i Izmihar wil	h, and accept
SIGNATURE	Signature, typed or printed name of registered ager	ni and title if applicable (NOTE: Registered Agent sig	nature required) when reinstating)		DATE		
	filing Fee is \$61.25 Due by May 1, 2007		Campaign Financing nd Contribution,	, a	\$5.00 May Be Added to Fees			k payable riment of	
10.	Due by May 1, 2007 OFFICERS AND D	Trust Fur				Flo	rida Depa	rtment of	State
TITLE	OFFICERS AND D	Trust Fur	11.		Added to Fees	Flo	rida Depa	rtment of	State IN 10
	Due by May 1, 2007 OFFICERS AND D	Trust Fur	nd Contribution,	<u> </u>	Added to Fees	Flo	rida Depa	rtment of	State IN 10
TITLE NAME	OFFICERS AND D PD WEIGHTMAN, GEORGE S	Trust Fur	11. TITLE	<u> </u>	Added to Fees	Flo	rida Depa	rtment of	State IN 10
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^{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 for 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 fike empowered.