

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # 758950

1. Entity Name
PEPPERTREE CIVIC ASSOCIATION, INC.



Principal Place of Business
**221 MADEIRA DR
ORLANDO, FL 32825 US**

Mailing Address
**509 S. CHICKASAW TRAIL
PMB 291
ORLANDO, FL 32825 US**



04052008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2113523

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**WEIGHTMAN, GEORGE S
221 MADEIRA DRIVE
ORLANDO, FL 32825**

**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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WEIGHTMAN, GEORGE S
STREET ADDRESS	221 MADEIRA DR
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	TD
NAME	BURNS, LINDA
STREET ADDRESS	200 THYME CT
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	SD
NAME	SERIO, KATHY
STREET ADDRESS	8711 SORREL DR.
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	VP
NAME	WITHAM, ALTON
STREET ADDRESS	319 CHUTNEY DR
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/23/08-80074-002 61.25

**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 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: GEORGE S. WEIGHTMAN

4-6-08 407-281-849

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #