

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760732

FILED
Apr 27, 2005
Secretary of State

Entity Name: PEPPERWOOD OF NAPLES CONDOMINIUM ASSOCIATION,INC

Current Principal Place of Business:

C/O EAGLE PROPERTY MANAGEMENT OF SW FL,INC
1337 EGRETS LANDING, #102
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 112260
NAPLES, FL 34108

New Mailing Address:

FEI Number: 59-2204103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EAGLE PROPERTY MANAGEMENT OF SW FL, INC.
1337 EGRETS LANDING, #102
NAPLES, FL 34108 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: VPD () Delete
Name: GILLARD, WILLIAM
Address: 4957 PEPPER CIRCLE #C106
City-St-Zip: NAPLES, FL 34113

Title: PD () Delete
Name: SANDS, MATT
Address: 4967 PEPPER CIRCLE #E204
City-St-Zip: NAPLES, FL 34113

Title: SD () Delete
Name: KUBIRSKI, ALAYNE
Address: 4973 PEPPER CIRCLE #F102
City-St-Zip: NAPLES, FL 34113

Title: TD () Delete
Name: LIEVENS, RAY
Address: 9473 PEPPER CIR #F202
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: STRECK, LINDA
Address: 4905 PEPPER CIRCLE B 202
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: SANNER, JOAN
Address: 4957 PEPPER CIRCLE #B204
City-St-Zip: NAPLES, FL 34113

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

Title: SD (X) Change () Addition
Name: KUBINSKI, ALAYNE
Address: 4973 PEPPER CIRCLE #F102
City-St-Zip: NAPLES, FL 34113

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 for the exemption stated in Section 119.07(3)(i), 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: MATT SANDS

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date