


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 24, 2008 08:00 AM**  
**Secretary of State**


**DOCUMENT # 763510**

1. Entity Name  
**PIPER'S LANDING GARDEN APARTMENTS, AREA NINE, CONDOMINIUM, INC.**



Principal Place of Business <b>6160 THISTLE TERRACE          PALM CITY, FL 34990</b>	Mailing Address <b>6160 THISTLE TERRACE          PALM CITY, FL 34990</b>
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**DO NOT WRITE IN THIS SPACE**



01082008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2264962</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**SAUSMAN, SALLY  
 4081-A SW PARKGATE BLVD.  
 PALM CITY, FL 34990**

**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 \_\_\_\_\_ (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 NAME STREET ADDRESS CITY-ST-ZIP	VP PADULO, ANTHONY 4081-D SW PARKGATE BLVD. PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SAUSMAN, SALLY 4081-A SW PARKGATE BLVD. PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SADDLER, JANE 4081-F SW PARKGATE BVLVD. PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000794554  
 01/28/08-80012-017 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:** Sarah J. Sausman 1/17/08 772 283-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #