

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769108

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** PEPPER TREE PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1801 PEPPERTREE DR.  
OLDSMAR, FL 34677 US

**New Principal Place of Business:**

**Current Mailing Address:**

1801 PEPPERTREE DR.  
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number:** 59-2389734

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STROSS, HOWARD C  
1801 PEPPER TREE DRIVE  
OLDSMAR, FL 34677 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: TSD ( ) Delete  
Name: GROTE, STEPHEN C  
Address: 190 WINDWARD PASSAGE  
City-St-Zip: CLEARWATER, FL 33767 US

Title: DD ( ) Delete  
Name: GROTE, MARY H  
Address: 190 WINDWARD PASSAGE  
City-St-Zip: CLEARWATER, FL 33767 US

Title: PD ( ) Delete  
Name: STROSS, HOWARD C  
Address: 83 S CANAL DRIVE  
City-St-Zip: PALM HARBOR, FL 33767 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: PD (X) Change ( ) Addition  
Name: STROSS, HOWARD C  
Address: 83 S CANAL DRIVE  
City-St-Zip: PALM HARBOR, FL 34684 US

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: HOWARD C. STROSS

PD

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date