


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90015 033 ****61.25

DOCUMENT # N25975 1. Entity Name PIPER'S GLEN ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 8694 INDIAN RIVER RUN BOYNTON BEACH, FL 33437 US			Mailing Address 8694 INDIAN RIVER RUN BOYNTON BEACH, FL 33437 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0198704	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent ASSOCIATION MANAGEMENT GROUP 8694 INDIAN RIVER RUN BOYNTON BEACH, FL 33437				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LASSITER, KENNITH 6131 HOOK LANE BOYNTON BCH., FL 33437	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cas Zawadecki 6181 Hook Lane Boynton Beach, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VP3 BRISSON, MICHAEL 12415 DOGLOG DRIVE BOYNTON BEACH, FL 33437		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VP1 HOWELL, HARTFORD 6228 GOLF VILLAS DRIVE BOYNTON BEACH, FL 33437		<input checked="" type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		SVP MARKOWITZ, JUDITH 12403 DOUGLEG DRIVE BOYNTON BEACH, FL 33437		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T O'BRIEN, WILLIAM 12391 DOGLEG DRIVE BOYNTON BEACH, FL 33437		<input checked="" type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		P Arnold Spalter 12371 Divot Drive Boynton Beach, FL 33437	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		P Judith Markowitz 12403 Dogleg Drive Boynton Beach, FL 33437	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		S Marilynn Ringel 6093 Slice Court Boynton Beach, FL 33437	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: <u>R. M. M. K.</u> 2/5/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					