

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34972

FILED
Apr 26, 2004
Secretary of State

Entity Name: PEPPER GROVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8277 SW 110 TERR
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

8277 SW 110 TERR
MIAMI, FL 33156

New Mailing Address:

FEI Number: 57-0928386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEILIA, ANTONIA
8277 SW 110 TERR
MIAMI, FL 33156

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: PST () Delete
Name: PRINGLE, HUGH K.,
Address: 8278 S.W. 110 TERR.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: PRINGLE, HUGH K.,
Address: 8278 S.W. 110 TERR.
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: PRINGLE, HUGH
Address: 8278 S W 110 TERR
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: SILCILIA, ANTONIA
Address: 8278 S.W. 110 TERR.
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: CUTLER, MARLENE
Address: 8299 S W 110 TERR
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ANTONIA SICILIA

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date