

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

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N95000004491

1. Entity Name
PIPERS GROUP HOME ASSOCIATION, INC.



Principal Place of Business
7781 BILTMORE BLVD
#PH
MIRAMAR, FL 33023 US

Mailing Address
7781 BILTMORE BLVD
#PH
MIRAMAR, FL 33023 US



01172008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0610949

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIPERS, VICTOR
7601 BILTMORE BLVD.
MIRAMAR, FL 33023

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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

Signature, typed or printed name of registered agent and title if applicable

(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

000000797303
01/29/08-80068-008 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PIPER, VICTOR
STREET ADDRESS	7781 BILTMORE BLVD.
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	D
NAME	PIPER, MARY
STREET ADDRESS	7781 BILTMORE BLVD.
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	D
NAME	LONEY, GLYNOLVIN
STREET ADDRESS	7781 BILTMORE BLVD.
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 supplementary 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 of Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-21-08 (954) 683-1099