FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE: Day



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 718346

(0)

PEBBLE BAY PROPERTY OWNERS' ASSOCIATION, INC.								
Principal Place	e of Business	Mailing Address			_	ı sanısı iddən tiddi ibidə illin dibid	IIII SISH DISH BIBII SIB	
4596 PEBBLE BAY S. P.O. BOX 3073 INDIAN RIVER SHORES. FL 32963 VERO BEACH. FL 32964			964	ŀ				
<u>.,</u>						 Date Incorporated or Qualified 04/16/1970 	3a. Date of Las 05/02/	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	1 33,02,	Applied For
Suite, Apt. #, etc.		26		59-1401730 Not Applica		Not Applicable		
22	π, 6ιο.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1	5 Additional
City & State	8	City & State		6 Floring Country 5	Fee	Required		
3		28		Election Campaign Financing Trust Fund Contribution	\$5.0	00 May Be ed to Fees		
Zip	Country Zip		Cou	ntry		This corporation has liability for interest.		
24		25 29 30				Florida Statutes Yes No		
	9. Name and Address of Curre	ent Registered Agent		-aT		10. Name and Address of New Re	gistered Agent	
COUOTA	I DOBERT I		ļ	81	Name			
SCHOEN, ROBERT J.				82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
4596 PEBBLE BAY SOUTH INDIAN RIVER SHORES FL 32963				83				
				•3				
				84	City		85 Z	ip Code
11. Pursuant to or register familiar with	to the provisions of Sections 617.050 ed agent, or both, in the State of Fio th, and accept the obligations of, Sec	02 and 617.1508, Florida Staturida. Such change was author	ites, the aborized by the c	ve-na orpo	amed corpor ration's boar	ation submits this statement for the purpord of directors. Thereby accept the appoin	FL see of changing its itment as registered	registered office d agent. I am
SIGNATURE	of a secopt the congulation of, both	onon 617.6505, Honda Statute	15.				•	· ·
	Signature, typed or printed name of registered age	nt and title if applicable. (N	IOTE: Registered	Agent :	signature required	d when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE		DRS IN 12
TITLE	P DELETE		1 1 Trī.	11 THTLE			Change	☐ Addition
NAME CIDSOT ADDRESS	SCHOEN, ROBERT J.			ME	1			
STREET ADDRESS	4596 PEBBLE BAY SOUTH			1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	INDIAN RIVER SHORES, FL 32963 VD			1.4 CITY - ST - ZIP				
NAME	JONES, WILLIAM			2 1 TITLE 22 NAME			☐ Change	☐ Addition
STREET ADDRESS	4705 PEBBLE BAY CIRCLE			2 3 STREET ADDRESS				
CITY-S1-ZIP	INDIAN RIVER SHORES, FL 32963			Y-ST	· · · · · · · · · · · · · · · · · · ·		_	
THILE	8	DELETE	3.1 Till		- 214		☐ Change	FT Addition
NAME	ZECK, WALTER			3.2 NAME			[Change	Addition
STREET ADDRESS	4645 PEBBLE BAY SOUTH			3.3 STREET ADDRESS				
CITY-ST-ZIP	INDIAN RIVER SHORES, FL 3	32963	3.4. C/T	Y-ST-	ZIP			
FITLE	D	DELETE	4.1 T(TL	.E			☐ Change	Addition
NAME	CURLEY, WILLIAM			ME				
STREET ADDRESS	4616 PEBBLE BAY S.		4.3 STR	EET AC	DORESS			
DITY-ST-ZIP TITLE	INDIAN RIVER SHORES FL 3		4.4 CITY		ZIP			
NAME	I IENOEN DAVIE	DELETE	51 TITL	•		_	☐ Change	Addition
STREET ADDRESS	JENSEN, DAYLE		5.2 NAN					İ
CITY-ST-ZIP	4725 PEBBLE BAY CIR INDIAN RIVER SHORES FL 32963			5 3 STREET ADDRESS				
TITLE	INDIAN HIVER SHURES PL 3	2963 □DELETE	5.4 C(T)		ZIP			
AME			6.1 TITU				Change	Addition
TREE1 ADDRESS			6 2 NAM		ontee			
CITY-ST-ZIP			63 STRI					
4. I do hereby	certify that the information supplied	with this filing is voluntarily furn	6.4 City hished and do		127 6	r the exemption stated in Section 119.07(3VV Elorida Ctat 4	00 16 uth ==
oath: that I	the information indicated on this anno am an officer or director of the corpo Block 12 or Block 13 if changed, or o	vation or the receiver or truste	nai report is	true a	and accurate execute this	r the exemption stated in Section 119.07(a and that my signature shall have the sar report as required by Chapter 617, Florid	ne legal effect as if a Statute as if a Statutes; and that	made under t my name