2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
04-10-2001 90030 030 ****61.25

DOCUMENT # 718346

1. Entity Name
PEBBLE BAY PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business
4596 PEBBLE BAY S.
INDIAN RIVER SHORES, FL 32963

Mailing Address
P.O. BOX 3073
VERO BEACH, FL 32964

C0043921

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 59-1401730
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHOEN, ROBERT J.
4596 PEBBLE BAY SOUTH
INDIAN RIVER SHORES FL 32963

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	TD	☐ Delete
NAME	SCHOEN, ROBERT J.	
STREET ADDRESS	4596 PEBBLE BAY SOUTH	
CITY-ST-ZIP	INDIAN RIVER SHORES, FL 32963	
TITLE	D	☐ Delete
NAME	BRADLEY, JOYCE	
STREET ADDRESS	4631 PEBBLE BAY SOUTH	
CITY-ST-ZIP	INDIAN RIVER SHORES, FL 32963	
TITLE	PD	☐ Delete
NAME	YATES, BRENDAN	
STREET ADDRESS	4646 PEBBLE BAY S	
CITY-ST-ZIP	INDIAN RIVER SHORES, FL 32963	
TITLE	D	☐ Delete
NAME	MURRAY, ANN	
STREET ADDRESS	4626 PEBBLE BAY E	
CITY-ST-ZIP	INDIAN RIVER SHORES FL 32963	
TITLE	D	☐ Delete
NAME	ORCUTT, JOHN	
STREET ADDRESS	4655 PEBBLE BAY S	
CITY-ST-ZIP	INDIAN RIVER SHORES FL 32963	
TITLE	D	☒ Delete
NAME	WHITE, JAMES	
STREET ADDRESS	4581 PEBBLE BAY SOUTH	
CITY-ST-ZIP	INDIAN RIVER SHORES FL 32963	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE REQUIRED Robert J. Schoen 4-07-01 (561) 234-4392
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #