


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90140 043 ****61.25

DOCUMENT # 746121
1. Entity Name
PEBBLE BEACH VILLAGE
HOMEOWNERS ASSOCIATION, INC.



00000000

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc. P O Box 1221
City & State FLAGLER BEACH, FL
Zip 32136 Country

3. Mailing Address
Suite, Apt. #, etc. P O Box 1221
City & State FLAGLER BEACH, FL
Zip 32136 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2206554
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name ROUNTREE, WYCLIFFE V JR
Street Address (P.O. Box Number is Not Acceptable) 47 PEBBLE BEACH CIRCLE
City FLAGLER BEACH, FL Zip Code 32136

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

FEE IS \$61.25
Initial or Amended UBR

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>VPD</u> <u>VATH, RON</u> <u>301 N. FLAGLER AVE.</u> <u>FLAGLER BEACH FL 32136</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>VPD</u> <u>LEONARD, WALTER</u> <u>126 OCEAN AIRE TERRACE, NORTH</u> <u>ORMOND-BY-THE-SEA, FL 32176</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>PD</u> <u>ROUNTREE, WYCLIFFE</u> <u>47 PEBBLE BEACH CIRCLE</u> <u>FLAGLER BEACH, FL 32136</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>TD</u> <u>LAHIFF, KATHLEEN</u> <u>69 BEACHWOOD DRIVE</u> <u>FLAGLER BEACH FL 32136</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>VPD</u> <u>PETERS, GEORGIA</u> <u>34 PEBBLE BEACH CIRCLE</u> <u>FLAGLER BEACH FL 32136</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: W. V. Rountree, Jr. W. V. Rountree Jr 3/19/03 306-473-7777

CR2E037B (12/02)