

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **746339** (1)
1. Corporation Name
PEBBLE SPRINGS CONDOMINIUM ASSOCIATION, INC.

APPROVED
AND
FILED
95 APR 25 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
% BENCHMARK PROPERTY MANAGEMENT, INC.
7932 WILES ROAD
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/20/1979** 3a. Date of Last Report **09/15/1994**
4. FEI Number **59-1745077** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
SUGARMAN, WILLIAM
BENCHMARK PROPERTY MANAGEMENT, INC.
7932 WILES ROAD
CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent
81 Name **Anne Bernstein**
82 Street Address (P.O. Box Number is Not Acceptable) **4004 N. W. 88th Avenue**
83
84 City **Sunrise, FL 33351** FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: *Anne P. Bernstein Pres* DATE: **4-17-95**

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BERNSTEIN, ANNE
STREET ADDRESS	4004 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351
TITLE	VD
NAME	GRABIN, MARSHA
STREET ADDRESS	3992 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351
TITLE	STD
NAME	KUSHNER, SYBIL
STREET ADDRESS	4050 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351
TITLE	D
NAME	GOROWITZ, MICHELLE
STREET ADDRESS	4042 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351
TITLE	D
NAME	DAMIANO, THERESA
STREET ADDRESS	4042 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351
TITLE	D
NAME	WHITE, JOSEPHINE DELETE
STREET ADDRESS	4010 N.W. 88TH AVENUE
CITY-ST-ZIP	SUNRISE FL 33351

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Sybil Kushner	
1.3 STREET ADDRESS	4050 N. W. 88th Avenue	
1.4 CITY-ST-ZIP	Sunrise, FL 33351	
2.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Marsha Grabin	
2.3 STREET ADDRESS	3992 N. W. 88th Avenue	
2.4 CITY-ST-ZIP	Sunrise, FL 33351	
3.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Michelle Gorowitz	
3.3 STREET ADDRESS	4042 N. W. 88th Avenue	
3.4 CITY-ST-ZIP	Sunrise, FL 33351	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Marjorie Raiten	
4.3 STREET ADDRESS	4060 N. W. 88th Avenue	
4.4 CITY-ST-ZIP	Sunrise, FL 33351	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Edward Stein	
5.3 STREET ADDRESS	4006 N. W. 88th Avenue	
5.4 CITY-ST-ZIP	Sunrise, FL 33351	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Charles Beehler	
6.3 STREET ADDRESS	4064 N. W. 88th Avenue	
6.4 CITY-ST-ZIP	Sunrise, FL 33351	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Anne P. Bernstein Pres* DATE: **4-17-95** 305 746-7019
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR