

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 23 PM 1:09

DOCUMENT # **748081** (7)  
1. Corporation Name  
**PEBBLE COVE CONDOMINIUM ASSOCIATION, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**3833 S. BANANA RIVER BLVD.  
COCOA BEACH FL 32931** **3833 S. BANANA RIVER BLVD.  
COCOA BEACH FL 32931**

3. Date Incorporated or Qualified **07/16/1979** 3a. Date of Last Report **06/28/1994**  
4. FBI Number **59-2246612** 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  
**SCHLOULT, CHRIS  
3833 S. BANANA RIVER BLVD.  
UNIT 101  
COCOA BEACH FL 32931**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Chris Schloult* (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS  
TITLE PD  
NAME SMYTH, ANNE  
STREET ADDRESS 3833 S BANANA RVR BLVD U105  
CITY - ST - ZIP COCOA BCH FL  
TITLE ST  
NAME WOOD, GEORGE  
STREET ADDRESS 3833 S BANANA RVR BLVD U304  
CITY - ST - ZIP COCOA BCH FL  
TITLE ST  
NAME TOSH, JACK  
STREET ADDRESS 3833 S BANANA RVR BLVD U305  
CITY - ST - ZIP COCOA BEACH FL  
TITLE AT  
NAME HENDRIX, WILLIAM  
STREET ADDRESS 3833 S BANANA RVR BLVD U302  
CITY - ST - ZIP COCOA BCH, FL 00000  
TITLE D  
NAME HELFAND, JANET  
STREET ADDRESS 424 S BANANA RD  
CITY - ST - ZIP COCOA BCH FL  
TITLE D  
NAME SCHLOUPT, CHRIS  
STREET ADDRESS 3833 S BANANA RVR BLVD U101  
CITY - ST - ZIP COCOA BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
NAME BRUNO CAPUTO  
1.2 STREET ADDRESS 3833 S. BANANA RVR BLVD U 301  
1.3 CITY - ST - ZIP COCOA BEACH FL 32931  
2.1 TITLE  Change  Addition  
2.2 NAME GLORIA LASCHA  
2.3 STREET ADDRESS 3833 S. BANANA RVR BLVD U 403  
2.4 CITY - ST - ZIP COCOA BEACH FL 32931  
3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

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 119.07(3)(b), 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: *Gloria Lascha Sec.* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY/MONTH/YEAR