

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748081

FILED  
May 07, 2009  
Secretary of State

Entity Name: PEBBLE COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3833 S. BANANA RIVER BLVD.  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

3833 S. BANANA RIVER BLVD.  
COCOA BEACH, FL 32931

**New Mailing Address:**

200 NORTH FIRST STREET  
COCOA BEACH, FL 32931

FEI Number: 59-2246612      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RIGERMAN, MARILYN A  
200 NORTH FIRST STREET  
COCOA BEACH, FL 32931      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DST      ( ) Delete  
Name: CUMMENS, JEAN  
Address: 3833 S BANANA RIVER BLVD 103  
City-St-Zip: COCOA BEACH, FL 32931

Title: DVP      ( ) Delete  
Name: CUPUTO, PATTI  
Address: 3833 S. BANANA RIVER BLVD.  
City-St-Zip: COCOA BEACH, FL 32931

Title: DP      ( ) Delete  
Name: ORSINE, LOUIS  
Address: 3833 S BUNNAU RIVER BLVD  
City-St-Zip: COCOA BEACH, FL 32931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DST      (X) Change ( ) Addition  
Name: CUMMINS, JEAN  
Address: 3833 S BANANA RIVER BLVD 103  
City-St-Zip: COCOA BEACH, FL 32931

Title: DVP      (X) Change ( ) Addition  
Name: CAPUTO, PATTI  
Address: 3833 S. BANANA RIVER BLVD.  
City-St-Zip: COCOA BEACH, FL 32931

Title: DP      (X) Change ( ) Addition  
Name: ORSINE, LOUIS  
Address: 3833 S BANANA RIVER BLVD  
City-St-Zip: COCOA BEACH, FL 32931

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS ORSINE

P

05/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date