FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 761671

1. Corporation Name

PEBBLE CREEK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	
4273 RIVER CHASE	
TALLAHASSEE FL 32308	
110	

Mailing Address

4273 RIVER CHASE TALLAHASSEE FL 32308 Mar 10, 1999 8:00 am § Secretary of State 03-10-1999 90228 038 ****61.25

FILED



NAME FORSYTHE, C STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TO DELETE STREET ADDRESS ALOS TAY D'SNAME STREET ADDRESS ALOS TAY D'SNAME STREET ADDRESS ALORESS ALORE	us us			US			1 120(1) (00(0 0)(3) (10(0 0))() (00(0) (10)) (00(0) (00)) (00(0) (00))		
28	<u> </u>	Data to 1 Di	leas of D. siesse	2a Mallina Address			3. Data Incorporated or Qualified		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Sp.2293766 Na. Applied For Sp.2293766 Sp. 2293766 Na. Applied For Sp.2293766 Sp. 2293766 Na. Applied For Sp. 2293766 Sp. 2293766 Na. Applied For Sp. 229376 Na. A	¬ '			⊢ •			· · · · · · · · · · · · · · · · · · ·		
SP-2293766									
City & State City & State City						59-2293766 Not Applicable			
29 20 25 29 20 30 Trust Fund Contribution \$5.00 May be a Added to Fees \$9. Name and Address of Current Registered Agent \$10. Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Address of New Registered Agent \$10. Name and Name and Name and Name and Address of New Registered						\$8.75 Additional			
Zip Country 2p Country 2p Country 6. Election Campaign Financing 75,00 May 8p Addition 5 and 2p St. 10 May 8p Addition 5 and 2p Addition 6 and 2p Addi	23			28			5. Certificate of Status Desired Fee Required		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name State Street Address (P.O. Box Number is Not Acceptable) 12. Street Address (P.O. Box Number is Not Acceptable) 13. Street Address (P.O. Box Number is Not Acceptable) 14. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the appointment as registered agent, and accept the appointm		Zip	Country		Country	,	6. Election Campaign Financing S5.00 May Be		
NASH, J 3652 SHAMROCK WEST TALLAHASSEE FL 32308 84 City Street Address (P.O. Box Number is Not Acceptable) 85 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 817,0502 and 817,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and remiliar with, and accept the obligations of, Section 617,0503, Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and remiliar with, and accept the obligations of, Section 617,0503, Florids, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent agent are finding with, and accept the obligations of, Section 617,0503, Florids Statutes. SIGNATURE 312 OFFICERS AND DIRECTORS 113. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 124 OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 125 WAME 126 TIME 127 OFFICERS AND DIRECTORS IN 12 127 WAME 128 TIME IN 32308 129 TIME DV 120 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 120 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 121 TIME 122 WAME 123 TIME IN 32308 123 TIME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 124 WAME 125 TIME DV 126 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 127 WAME ABOUT B 128 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 129 AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 129 AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 120 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 120 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 121 TIME 122 WAME 123 TIME DV 124 TIME DV 125 AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 125 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 126 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 127 WAME DV ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 128 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 129 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	24		25	29 30	1				
NASH, J 3652 SHAMPOCK WEST TALLAHASSEE FL 32308 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. The corporation's board of directors. I hereby accept the appointment as registered agent. The corporation's board of directors. I hereby accept the appointment as registered agent. The accept the original agent. The corporation's board of directors. I hereby accept the appointment as registered agent. The accept the original agent. The acce	_		9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
3652 SHAMPOCK WEST TALLAHASSEE FL 32308 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 office or registered depends on the provisions of Sections 617.0502 Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 12 TITLE DV OChange Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFF					81	Name			
3652 SHAMPOCK WEST TALLAHASSEE FL 32308 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 office or registered depends on the provisions of Sections 617.0502 Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OFFICERS AND DIRECTORS IN 12 TITLE DV OChange Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DV OCHANGE ADDITIONS/CHANGES TO OFF		NASH I			82	92 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32308 83			MROCK WEST			Cuboti			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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, 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, 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, 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, or both appointment as registered agent and tile if applicable. ITILE DATE DATE DATE LATITUTE DATE LATITUTE LATITUTE DATE Addition Ad					83				
11. Fursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the prurpose 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 office or registered agent, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE DP OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DP OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DP OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DV ABBOTT, ST.2P TALL FL 32308 DELETE 1.1 TITLE DV AChange Addition ARCHARGE TALL FL 32308 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DV AChange Addition Addition ACHARGE ARCHARGE ARCHA		I MALLANIAN	DEC 1 E 02000		0.4	City	RE Zin Code		
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 an familiar with and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent appnitude when reinstating) DATE					184	City	FL S Zip Code		
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 an familiar with and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent appnitude when reinstating) DATE	11	Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the abov	e-named c	corporation submits this statement for the purpose of changing its registered		
SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DP		office or re	egistered agent, or both, in the State o	f Florida. Such change was auth	orized by	the corpor	ration's board of directors. I hereby accept the appointment as registered		
Signature, typed or printed agent and title it appointable. (NOTE: Registered Agent signature required when retrinating) DATE	-		The tarrings that, and accept the congain			•			
TITLE DP DELETE 1.1 TITLE 1.2 NAME STREET ADDRESS 4105 TAM O SHANTER TITLE DV DV DELETE 2.1 TITLE DV MAME ABBOTT, B STREET ADDRESS GITY-ST-ZIP TALL FL 32308 TITLE DT DT DELETE 3.3 TREET ADDRESS GITY-ST-ZIP TALL FL 32308 TITLE DT DT DELETE 3.3 TAME DELETE 3.3 TREET ADDRESS GITY-ST-ZIP TALL FL 32308 TITLE DT DT DELETE 3.3 TAME DT DELETE 3.3 TAME DT DELETE 3.3 TAME DT DELETE 3.3 TREET ADDRESS GITY-ST-ZIP TALL FL 32308 TITLE DS DELETE 3.4 TITLE DS DAME FORSYTHE, C 4.2 NAME ADDRESS 4.2 STREET ADDRESS 4.2 STREET ADDRESS 4.3 STREET ADDRESS 4.4 TITLE DS DAWG ADDRESS 4.2 STREET ADDRESS 4.3 STREET ADDRESS 5.3 STREET ADD	21	GNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature re			
MAME BOYLE, W E STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE DV AMME ABBOTT, B STREET ADDRESS STREET ADDRESS TALL FL 32308 TOWN-ST-ZIP TALL FL 32308	12	2	OFFICERS AND		13.				
STREET ADDRESS CITY-ST-ZIP TITLE DV NAME ABBOTT, B STREET ADDRESS 3448 JONATHANS LANDING CITY-ST-ZIP TITLE DT NAME EDWARDS, C W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALL FL 23208 TITLE DS NAME FORSYTHE, C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALL FL 23208 DELETE TITLE DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 23208 DELETE TITLE DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 23208 DELETE TITLE DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 23208 DELETE TITLE DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 23208 DELETE TITLE DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 DELETE TITLE D NAME FORSYTHE, C STREET ADDRESS TALL FL 32308 DELETE TITLE D NAME STREET ADDRESS TALL FL 32308 DELETE TALL FL 3	TIT	LE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition		
TALL FL 32308 1.4 CITY-ST-ZIP TITLE DV NAME ABBOTT, B STREET ADDRESS 3448 JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 2.2 NAME 2.3 STREET ADDRESS 3.4 LOTY-ST-ZIP TALL FL 32308 Addition NAME EDWARDS, C W 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TALL FL 23230 TALL FL 32308 ADDELETE 3.1 TITLE DS TALL FL 23230 TALL FL 23230 ADDELETE 4.1 TITLE DS Change Addition Addition TALL FL 32308 TALL FL 32308 ADDELETE 4.1 TITLE DS Change Addition Addition Addition TALL FL 32308 TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition Addition TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition Addition TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition Addition TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition Addition TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition Addition Addition Addition Addition TALL FL 32308 ADDELETE 5.1 TITLE D Change Addition ADDELETE BLANKE BLANKE ADDELETE BLANKE BLA	NA	ME	BOYLE, W E		1.2 NAME				
TITLE DV NAME ABBOTT, B STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE DT NAME EDWARDS, C W STREET ADDRESS 3441 JONATHANS LANDING CITY-ST-ZIP TALL FL 23230 TITLE DS TALL FL 23230 TITLE DS TALL FL 23230 TITLE DS TALL FL 32308 TALL FL 23230 TITLE DS TALL FL 32308 TALL F	STI	REET ADDRESS	4105 TAM O SHANTER		1.3 STREE	T ADDRESS			
NAME ABBOTT, B STREET ADDRESS 3448 JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 TILE DT NAME EDWARDS, C W STREET ADDRESS CITY-ST-ZIP TALL FL 23230 TALL FL 23230 TOLL DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TOLL TOLL DS NAME FORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TOLL TOLL DS NAME STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TOLL TOLL DS NAME STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TOLL TOLL TOLL DS CHange MAddition MAddition MADE MILLIAMS, W STREET ADDRESS	СП	Y-ST-ZIP	TALL FL 32308		1.4 CMY-5	T-ZIP			
STREET ADDRESS 3448 JONATHANS LANDING TALL FL 32308 TITLE DT NAME EDWARDS, C W STREET ADDRESS CITY-ST-ZIP TALL FL 23230 TORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TALL FL 32308 TORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TALL FL 32308 TORSYTHE, C STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TALL	TIT	LE	DV	DELETE	2.1 TΠLE		~ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
TITLE DT MAME EDWARDS, C W STREET ADDRESS 3441 JONATHANS LANDING CITY-ST-ZIP TALL FL 23230 TITLE DS ADELETE 4.1 TITLE DS ADELETE 4.1 TITLE DS ADELETE 4.2 NAME DOUG NICHOLS STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D MAME WILLIAMS, W STREET ADDRESS 3444 JONATHANS LANDING TITLE D MAME STREET ADDRESS 3444 JONATHANS LANDING TITLE D MAME WILLIAMS, W STREET ADDRESS 3444 JONATHANS LANDING TITLE D MAME STREET ADDRESS 3444 JONATHANS LANDING TITLE D MAME STREET ADDRESS 3444 JONATHANS LANDING TITLE D MAME HUTCHINSON R DELETE 6.1 TITLE D MAME HUTCHINSON R	NA	ME.	ABBOTT, B		2.2 NAME		Barry Simmons,		
TITLE DT NAME EDWARDS, C W STREET ADDRESS CITY-ST-ZIP TALL FL 23230 NAME FORSYTHE, C STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS STREET ADR	STE	REET ADDRESS	3448 JONATHANS LANDING		2.3 STREE	T ADDRESS	4104 Tam O'Shanter		
STREET ADDRESS STREET	СП	Y-ST-ZIP	TALL FL 32308		2.4 CITY-	ST-ZIP			
STREET ADDRESS CITY-ST-ZIP TALL FL 23230 TITLE DS NAME FORSYTHE, C STREET ADDRESS TALL FL 32308 TOLL FL 32308 DELETE TITLE D NAME WILLIAMS, W STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS TOLL FL 32308 TOLL FL 323	TIT	LE	DT	DELETE	3.1 TITLE				
TITLE DS DELETE TALL FL 23230 TITLE DS DELETE TORSYTHE, C STREET ADDRESS TALL FL 32308 TITLE D D DELETE TALL FL 32308 TITLE D D D D D D D D D D D D D D D D D D D	NA	ME	EDWARDS, C W		32 NAME	l	W.W. Young,		
TITLE DS NAME FORSYTHE, C STREET ADDRESS 4281 RIVER CHASE TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS SALA JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 TITLE D NAME HUTCHINSON R DELETE S1 TITLE D NAME HUTCHINSON R	STI	REET ADDRESS	3441 JONATHANS LANDING		3.3 STREE	TADORESS			
TITLE DS NAME FORSYTHE, C STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS SALE FL TALL FL 32308 TITLE D NAME STREET ADDRESS SALE FL TALL FL 32308 TITLE D NAME HUTCHINSON R DELETE SAME SALE FL 32308 Addition	CIT	Y-ST-ZIP	TALL FL 23230		3.4. CITY-5	ST-ZIP	Tallahassee, FL 32308		
NAME FORSYTHE, C STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS A108 TAM O'Shanter TALL FL 32308 DOUG NICHOLS 4.2 NAME 4.3 STREET ADDRESS A108 TAM O'Shanter TALL FL 32308 TITLE D NAME STREET ADDRESS A108 TAM O'Shanter TALL FL 32308 TALL FL 32308 TITLE D NAME D NAME D NAME HUTCHINSON R Addition	TIT	LE .		DELETE	4.1 TITLE		D\$ Change Addition		
STREET ADDRESS 4281 RIVER CHASE CITY-ST-ZIP TALL FL 32308 TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME STREET ADDRESS TALL FL 32308 TITLE D NAME HUTCHINSON R 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TALL FL 32308 5.4 CITY-ST-ZIP TALL FL 32308 TITLE D NAME HUTCHINSON R	NA	ME	FORSYTHE, C		4.2 NAME	[1	Doug Nichols ,		
TITLE D NAME WILLIAMS, W STREET ADDRESS CITY-ST-ZIP TALL FL 32308 TITLE D NAME TALL FL 32308 TITLE D NAME TALL FL 32308 TITLE D NAME HUTCHINSON R Addition TALL FL 32308 TOTAL FL 32308 T	STE	REET ADDRESS	·		4.3 STREE	TADDRESS	4108 Tam O'Shanter		
TITLE D NAME WILLIAMS, W STREET ADDRESS 3444 JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 TITLE D NAME HUTCHINSON R DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TALL A SSCL FL 32308 DELETE 6.1 TITLE D NAME HUTCHINSON R	CIT	Y-ST-ZIP		1	4.4 CITY-5	T-ZIP	Tallahassee, FL		
STREET ADDRESS 3444 JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 TITLE D NAME HUTCHINSON R 5.3 STREET ADDRESS 34 23 JONATHANS LANDING 5.4 CITY-ST-ZIP TALL ASSEL, FL 32308 Addition SOLUTION				DELETE	5.1 TITLE		Change X Addition		
STREET ADDRESS 3444 JONATHANS LANDING CITY-ST-ZIP TALL FL 32308 TITLE D NAME HUTCHINSON R 53 STREET ADDRESS 34 23 JONAThans Landing 54 CITY-ST-ZIP TALL ASSEC FL 32308 55 STREET ADDRESS 34 23 JONAThans Landing 56 STREET ADDRESS 34 23 JONAThans Landing 57 STREET ADDRESS 34 23 JONAThans Landing 58 STREET ADDRESS 34 23 JONAThans Landing 59 STREET ADDRESS 34 23 JONAThans Landing 59 STREET ADDRESS 34 23 JONAThans Landing 59 STREET ADDRESS 34 23 JONAThans Landing 50 STREET ADDRESS 34 23 JONAThans Landing 59 STREET ADDRESS 34 23 JONAThans Landing 59 STREET ADDRESS 34 23 JONAThans Landing 50 S	NA	ME I	. =	-	5.2 NAME		Lewis Catt		
TALL FL 32308 TITLE D NAME HUTCHINSON R 54 CITY-ST-ZIP TRIT A LASSEL, FL 32308 SOBELETE 6.1 TITLE D SChange Addition 12 NAME BCCC A LASSEL A	STI	REET ADDRESS			5.3 STREE	TADORESS	3423 JonaThan's Landing		
TITLE D SChange Addition NAME HUTCHINSON R DELETE 6.1 TITLE 1.2 NAME 1.3 CT ACT A About 1.3 CT A ABOUT	CIT	Y-ST-ZIP			5.4 CITY-S	T-ZIP _	Tallahassee FL 32308		
NAME HUTCHINSON R 62 NAME BUTCHINSON R				DELETE	6.1 TITLE				
	NA.	ME Ì	HUTCHINSON, R		6.2 NAME		Bernard Albbott , ,		
STREET ADDRESS 3412 JONATHANS LANDING 63 STREET ADDRESS 3448 JONATLAN'S LANDING		(6.3 STREE	TADORESS	3448 Jonathan's Landing		
CITY-ST-ZIP TALL FL 32308 64 CITY-ST-ZIP TAKANASSEL, FL 32308		í			6.4 CITY-S	T-ZIP			

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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.