

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761671

FILED  
Mar 08, 2009  
Secretary of State

Entity Name: PEBBLE CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4273 RIVER CHASE  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

4273 RIVER CHASE  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

FEI Number: 59-2293766      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDWARDS, C. WAYNE  
3441 JONATHAN'S LANDING  
TALLAHASSEE, FL 32309 US

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

GONZALES, BARBARA L  
4277 RIVER CHASE  
TALLAHASSEE, FL 32309 US

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: BARBARA L. GONZALES      03/08/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: EDWARDS, C. WAYNE  
Address: 3441 JONATHAN'S LANDING  
City-St-Zip: TALLAHASSEE, FL 32309

Title: DS ( ) Delete  
Name: WELLS, JIM  
Address: 3416 JONATHAN'S LANDING, LOT F-5  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: EDWARDS, WAYNE  
Address: 3441 JONATHAN'S LANDING  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: BALLOU, WILLIAM  
Address: 3411 JONATHAN'S LANDING  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD (X) Change ( ) Addition  
Name: MCNAMARA, THOMAS B  
Address: 3332 PIPING ROCK  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD (X) Change ( ) Addition  
Name: GONZALES, BARBARA L  
Address: 4277 RIVER CHASE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD ( ) Change (X) Addition  
Name: WISE, CHRISTOPHER  
Address: 4301 RIVER CHASE  
City-St-Zip: TALLAHASSEE, FL 32309

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: BARBARA L. GONZALES      TD      03/08/2009  
Electronic Signature of Signing Officer or Director      Date