## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009948

FILED Apr 12, 2006 Secretary of State

Entity Name: PEBBLE BEACH AT LAGUNA LAKES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3300 UNIVERSITY DR. 1044 CASTELLO DRIVE

CORAL SPRINGS, FL 33065 SUITE 206

NAPLES, FL 34103 US

Current Mailing Address: New Mailing Address:

C/O SOUTHWEST PROPERTY MGMT 1044 CASTELLO DRIVE # 206 NAPLES, FL 34103

FEI Number: 20-0415282 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SIMON, ERIC A SOUTHWEST PROPERTY MANAGEMENT CORP.

3300 UNIVERSITY DR.

CORAL SPRINGS, FL 33065 US

1044 CASTELLO DRIVE
SUITE 206

NAPLES, FL 34103 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: STEPHEN E. WILLIAMS 04/12/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition
Name: SCHNEIDERMAN, MARC Name: WALSH, MICHAEL

Name: SCHNEIDERWAN, MARC Name: WALSH, MICHAEL
Address: 3300 UNIVERSITY DR. Address: 9215 CALLE ARRAGON AVE., #204

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: FORT MYERS, FL 33908

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: CROWELL, MARYANN Name: GOODRICH, JOHN

 Address:
 3300 UNIVERSITY DR.
 Address:
 9227 CALLE ARRAGON AVE., #204

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 FORT MYERS, FL 33908

Title: VSTD ( ) Delete Title: S (X) Change ( ) Addition

Name:DIFIORE, CORAName:HENAO, KIMAddress:3300 UNIVERSITY DR.Address:9250 BELLEZA WAY, #202

Address: 3300 UNIVERSITY DR. Address: 9250 BELLEZA WAY, #202
City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: FORT MYERS, FL 33908

Title: Title: T ( ) Change (X) Addition

 Name:
 Name:
 GARZIA, JOE

 Address:
 Address:
 9200 BELLEZA WAY, #201

 City-St-Zip:
 City-St-Zip:
 FORT MYERS, FL 33908

 $\label{eq:Title:D} {\sf Title:} \qquad \qquad {\sf D} \qquad \qquad (\ ) \ {\sf Change} \ \ ({\sf X}) \ {\sf Addition}$ 

Name: Name: MANGANELLO, JOHN

Address: Address: 9209 CALLE ARRAGON AVE., #203

City-St-Zip: City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL WALSH P 04/12/2006