

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 06, 2007
Secretary of State**

DOCUMENT# N06000006424

Entity Name: PEBBLE BROOKE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2709 KILLEARNEY WAY UNIT 3
TALLAHASSEE, FL 32309

New Principal Place of Business:

3402 APALACHEE PARKWAY
TALLAHASSEE, FL 32311 US

Current Mailing Address:

2709 KILLEARNEY WAY UNIT 3
TALLAHASSEE, FL 32309

New Mailing Address:

3402 APALACHEE PARKWAY
TALLAHASSEE, FL 32311 US

FEI Number: 26-0611975 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:

BENNETT, JIM
3402 APALACHEE PARKWAY
TALLAHASSEE, FL 32311 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: JIM BENNETT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENNETT, JIM
Address: 3402 APALACHEE PARKWAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: VD () Delete
Name: HANSELMAN, DAVID
Address: 3031 ELIZA ROAD, SUITE 1
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: LIEDY, STEVEN
Address: 3031 ELIZA ROAD, SUITE 1
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: BOYKIN, CHAD
Address: 3402 APALACHEE PARKWAY
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JIM BENNETT

PD

11/06/2007

Electronic Signature of Signing Officer or Director

Date