

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006424

FILED
Feb 24, 2011
Secretary of State

Entity Name: PEBBLE BROOKE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 13089
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 26-0611975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHINEHEART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: P
Name: COOKE, DOUGLAS
Address: 668 BROKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: VP
Name: LAUER, STEVE
Address: 758 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: S/T
Name: JACOBSON, DOUG
Address: 762 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: D
Name: JONES, KAREEN
Address: 511 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: D
Name: FORSMAN, LILY
Address: 783 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT S. RHINEHART

RA

02/24/2011

Electronic Signature of Signing Officer or Director

Date