

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
FILED**

95 APR 24 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17348 (6)

1. Corporation Name

**PEBBLE CREEK HOMEOWNERS ASSOCIATION OF HILLSBORO
UGH COUNTY, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

% FLORIDA SOUTHEAST DEV CORP
3816 W LINEBAUGH, SUITE 105
TAMPA FL 33624

% FLORIDA SOUTHEAST DEV CORP
3816 W LINEBAUGH, SUITE 105
TAMPA FL 33624

3. Date Incorporated or Qualified 10/16/1986	3a. Date of Last Report 03/16/1994
4. FEI Number 59-2754231	Applied For Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 WESTCHASE ASSOCIATES Suite, Apt. #, etc.	26 WESTCHASE ASSOCIATES Suite, Apt. #, etc.
22 1509 W. SWANN AVE., #230 City & State	27 1509 W. SWANN AVE., #230 City & State
23 TAMPA, FL Zip Country	28 TAMPA, FL Zip Country
24 33606 U.S.A.	29 33606 U.S.A.

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MAMULA, KENNETH
FLORIDA SOUTHEAST DEV CORP.
3816 W LINEBAUGH, SUITE-105
TAMPA FL 33624**

10. Name and Address of New Registered Agent

81 Name JOHN R. VASKO JR.
82 Street Address (P.O. Box Number is Not Acceptable) 9906 CYPRESS SHADOW AVE.
83 City TAMPA, FL
84 City TAMPA
85 Zip Code FL 33647

11. Pursuant to the provisions of Sections 607.0012 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **3/29/95**

12. OFFICERS AND DIRECTORS

TITLE PD	NAME PIZZITOLA, VINCENT A.
STREET ADDRESS 19851 BRUCE B DOWNS BLVD	CITY - ST - ZIP TAMPA FL
TITLE STD	NAME SMITH, PAUL
STREET ADDRESS 19851 BRUCE B DOWNS, STE. A1-5	CITY - ST - ZIP TAMPA FL
TITLE D	NAME TOLLEY, ALTON
STREET ADDRESS 19851 BRUCE B DOWNS, STE. A1-5	CITY - ST - ZIP TAMPA FL
TITLE D	NAME GREISING, ANTHONY
STREET ADDRESS 19851 BRUCE B DOWNS, STE. A1-5	CITY - ST - ZIP TAMPA FL
TITLE D	NAME MAMULA, KENNETH
STREET ADDRESS 3816 W LINEBAUGH #105	CITY - ST - ZIP TAMPA FL
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1*

11 TITLE PD	12 NAME VASKO JR., JOHN R.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13 STREET ADDRESS 9906 CYPRESS SHADOW AVE.	14 CITY - ST - ZIP TAMPA FL 33647	
21 TITLE VD	22 NAME GRINNELL, LYNN D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
23 STREET ADDRESS 9908 COLONNADE RD.	24 CITY - ST - ZIP TAMPA FL 33647	
31 TITLE STD	32 NAME MACAULAY, KENNETH W.	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
33 STREET ADDRESS 2030 PLANTATION KEY CIRCLE #207	34 CITY - ST - ZIP BRANDON FL 33511	
41 TITLE D	42 NAME ROWLETT, JACK	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
43 STREET ADDRESS 1509 W. SWANN AVE., SUITE 230	44 CITY - ST - ZIP TAMPA FL 33606	
51 TITLE D	52 NAME JOHNSTON, TY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
53 STREET ADDRESS 1509 W. SWANN AVE., SUITE 230	54 CITY - ST - ZIP TAMPA FL 33606	
61 TITLE	62 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
63 STREET ADDRESS	64 CITY - ST - ZIP	

14. I do hereby certify that the information furnished with this report is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block (2) or Block (13) if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **JOHN VASKO, JR.** DATE: **2/27/95** PHONE: **813-973-1370**