## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17348

Apr 09, 2004 Secretary of State

Entity Name: PEBBLE CREEK HOMEOWNERS ASSOCIATION OF HILLSBOROUGH COUNTY, INC.

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

18715 BENT TREE LANE TAMPA, FL 33647

**Current Mailing Address: New Mailing Address:** 

18715 BENT TREE LANE TAMPA, FL 33647

FEI Number: 59-2754231 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:

MCDERMOTT, MICHAEL J P.A. 791 W. LUMSDEN ROAD BRANDON, FL 33511

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:**

() Delete CARRICATO, MICHAEL J Name: 18716 FOREST GLEN CT Address:

City-St-Zip: TAMPA, FL 33647

Title: ( ) Delete MAINVILLE, RICK Name:

Address: 9715 CYPRESS POND AVE.

City-St-Zip: TAMPA, FL 33647

Title: 2VP () Delete FLETCHER, JOHN Name: Address: 18912 FAIRWOOD CT.

City-St-Zip: TAMPA, FL 33647

Title: () Delete

Name: PHILLIPS, KIM 19019 WEATHERSTONE AVE. Address:

City-St-Zip: TAMPA, FL 33647

Title: () Delete

OAKLEY-CLANCY, LINDA Name: 18319 FELSPAR WAY Address: City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

MAINVILLE, RICK Name:

Address: 9715 CYPRESS POND AVE.

City-St-Zip: TAMPA, FL 33647

Title: (X) Change ( ) Addition

Name: CARRICATO, MICHEAL J Address: 18716 FORREST GLEN CT

City-St-Zip: TAMPA, FL 33647

Title: 2VP (X) Change ( ) Addition

AMON, JOHN Name:

18730 FORREST GLEN CT Address:

City-St-Zip: TAMPA, FL 33647

Title: (X) Change ( ) Addition

Name: LAUER, CONSUELO Address: 9917 COLONNADE DRIVE

City-St-Zip: TAMPA, FL 33647

Title: (X) Change ( ) Addition

VEGA, ROBERTO Name: 9719 FOX CHAPEL RD Address: City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERTO VEGA Т 04/09/2004