2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17348

Apr 29, 2005 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. LUMSĎEN ROAD BRANDON, FL 33511

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MAINVILLE, RICK NEGRON, NOEL Name: Name: 9715 CYPRESS POND AVE. Address: 9715 CYPRESS POND AVE. Address:

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

Title: Title: 1VP

() Delete (X) Change () Addition CARRICATO, MICHEAL J Name: HEIRE, TANYA J Name:

Address: 18716 FORREST GLEN CT Address: 18716 FORREST GLEN CT

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

Title: 2VP () Delete Title: 2VP (X) Change () Addition

AMON, JOHN COUNCIL, ROBERT Name: Name: 18730 FORREST GLEN CT 18730 FORREST GLEN CT Address: Address:

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

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

Name: LAUER, CONSUELO Name: BILLINGS, SHANE 9917 COLONNADE DRIVE 9917 COLONNADE DRIVE Address: Address:

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: () Change () Addition

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

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 04/29/2005