## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N43847**

1. Entity Name

SIGNATURE: /

PEBBLE CREEK OF MELBOURNE HOMEOWNERS' ASSOCIATIO



**FILED** Jan 13, 2003 8:00 am § Secretary of State

01-13-2003 90705 007 \*\*\*\*61.25

321-757-6855

Principal Pla										
	ace of Busines	S	Mailing Address							
P.O. BOX 410553 MELBOURNE FL 32941-0553			P.O. BOX 410553			1	~~	,,,,,,		
MELBOURNE US	FL 32941-0553		MELBOURNE FL 32941-05 US	53						
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2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Sta	ate		City & State	<u>-</u>		4 EEI Number E	0.0444005	1	antial Co.	٦
,			ony a orano			4. FEI Number 5	9-3111985		pplied For lot Applicable	┥
Zip		Country	Zip	Country		5 0 25 25 25		\$8.75 Ac		1
						5. Certificate of St		Fee Require		l
	6. Name	and Address of Current	Registered Agent				ress of New Regist	ered Agent		1
COLUETO	NI BAREST	-		Na	™ BAR	RETT, C	HARLES	R.		l
SCHLEICH, ROBERT F.				Stre	et Address (	P.O. Box Number is N	Vot Acceptable)		<del></del>	1
2910 PEBBLE CREEK STREET MELBOURNE FL 32935					455	4 KIVERA	MIST DRI	<u> </u>		Į
MELDOC	JANE PL 323									ŀ
				City	11=1	BOURNE		FL Zip Coo	de	1
8. The above	e named entity	submits this statement for	or the purpose of changing its	registered office	ce or register	ed agent, or both, in:	the State of Florida	Lam familiar with	ond conent	┨
thể obliga	ations of regist	ered agent.			oo or register	od agent, or both, in	the state of Fishida.	Tan Tanınıai Willi	, and accept	
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SIGNATURE		lu K Ba	New L'HAR	RLES K.	. BAR	RETT TR	EASURER/	DIRECTOR	و	1
•	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent	signature required	when reinstating)		DATE //09	<u>/03</u>	
					u	7			, , ,	
	FILE NOW	FEE IS \$61.25	9. Election Car		_	\$5.00 May Be	Make C	heck Payable	to	
			Trust Fund (	Comparison at a se						
			index   direct	Jontribution.		Added to Fees	Florida De	epartment of	State	
10		OFFICERS AND DU								
10.	IPD	OFFICERS AND DIF	RECTORS	11.	A	Added to Fees  ADDITIONS/CHANGE		ID DIRECTORS IN	V 10	1
10. TITLE NAME	1			11.	P/D	ADDITIONS/CHANGE	ES TO OFFICERS AN			100/
TITLE	PD ROSE, ROI 4526 RIVE	Bert R	RECTORS	11. TITLE NAME	P/D	ADDITIONS/CHANGE	ES TO OFFICERS AN	ID DIRECTORS IN	V 10	100,000
TITLE NAME	ROSE, ROI 4526 RIVE	Bert R	RECTORS	11.	P/D SPR 3933	INKLE, TERR	ES TO OFFICERS AN ANCE EEK ST	ID DIRECTORS IN	V 10	(00) 077 (20)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROSE, ROI 4526 RIVE	Bert R Rmist Dr	RECTORS  Delete	11. TITLE NAME STREET ADDR CITY-SI-ZIP	P/D SPR 3933 MEL	ADDITIONS/CHANGE INKLE, TERRI L PEBBLE CRE BOURNE, FL	ES TO OFFICERS AN ANCE EEK ST. L 31935	ND DIRECTORS IN	N 10	100/07 (40/00)
TITLE NAME STREET ADDRESS	ROSE, ROI 4526 RIVEI MELBOURI T	Bert R Rmist Dr	RECTORS	11. TITLE NAME STREET ADDR	P/D SPR 3933 MEL	ADDITIONS/CHANGE INKLE, TERRI L PEBBLE CRE BOURNE, FL	ES TO OFFICERS AN ANCE EEK ST. L 31935	ID DIRECTORS IN	V 10	CD0F007 (40,00)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ROSE, ROI 4526 RIVEI MELBOURI T SCHLEICH 2910 PEBE MELBOURI	Bert R Rmist Dr Ne Fl 32983 , Robert F.	RECTORS  Delete	11. TITLE NAME STREET ADDR CITY-SI-ZIP TITLE NAME	P/D SPR 2933 MEL V/D Logic 452	ADDITIONS/CHANGE INKLE, TERRI L PEBBLE CRE BOURNE, FL	ES TO OFFICERS AN ANCE EEK ST. L 32935	ND DIRECTORS IN	N 10	ODOFO07 (40,000)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ROSE, ROI 4526 RIVEI MELBOURI T SCHLEICH 2910 PEBE MELBOURI VPD	BERT R RMIST DR NË FL 32983 , ROBERT F. BLE CREEK STREET NE FL 32935	RECTORS  Delete	11. TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	P/D SPR 293) MEL V/D LogL 4524 ME	ADDITIONS/CHANGE INKLE, TERRI PEBBLE CRE BOURNE, FL ULLO, MARIE I RIVERMIST	ES TO OFFICERS AN ANCE EEK ST. L 32935	ID DIRECTORS IN Change	Addition Addition	CD01047 70000
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	ROSE, ROI 4526 RIVEI MELBOURI T SCHLEICH 2910 PEBE MELBOURI VPD SCHLEICH 2910 PEBE MELBOURI	BERT R RMIST DR NE FL 32983 ROBERT F. BLE CREEK STREET NE FL 32935	RECTORS  Delete  Delete	11. TITLE NAME STREET ADDR CITY-SI-ZIP TITLE NAME STREET ADDR CITY-SI-ZIP TITLE	P/D SPR 293) MEL V/D LogL 452: Mel T/D BAR 455:	NKLE, TERRI NKLE, TERRI PEBBLE CRE BOURNE, FL ILLO, MARIE 2 RIVERMIST LBOURNE, F	ANCE SEK ST. L 31935 T DR L 32935 RLES R.	ID DIRECTORS IN Change	Addition Addition	ODOFO02 (40/00)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	ROSE, ROI 4526 RIVEI MELBOURI T SCHLEICH 2910 PEBE MELBOURI VPD SCHLEICH 2910 PEBE MELBOURI SD BAUER, DE 2914 PEBB MELBOURI D HUGHS, CI 4528 RIVEF	BERT R RMIST DR NE FL 32983  ROBERT F. BLE CREEK STREET NE FL 32935  THERESA LE CREEK ST NE FL 32935  BRA LE CREEK ST NE FL 32935  HARLES MIST DR	BECTORS  Delete  Delete  Delete	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDRI S	P/D SPRI 1933 MEL V/D Logic 452: MEL T/D BAR 455: ME D KUHI 300: MEI	ADDITIONS/CHANGE INKLE, TERRIL PEBBLE CRE BOURNE, FL  ILLO, MARIE L RIVERMIST LBOURNE, F  RETT CHA LBOURNE, F  LBOURNE, F  N, JOSEPH L PEBBLE CR	ESTO OFFICERS AN ANCE SEK ST. L 32935 T DR L 32935 RLES R. ST DR L 32935	ID DIRECTORS IN  Change  Change  Change	Addition  Addition  Addition	ODDED02 (40/00)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ROSE, ROI 4526 RIVEI MELBOURI T SCHLEICH 2910 PEBE MELBOURI VPD SCHLEICH 2910 PEBE MELBOURI SD BAUER, DE 2914 PEBB MELBOURI D HUGHS, CI 4528 RIVEF	BERT R RMIST DR NE FL 32983  ROBERT F. BLE CREEK STREET NE FL 32935  THERESA LE CREEK ST NE FL 32935  BRA LE CREEK ST NE FL 32935  HARLES MIST DR	Delete  Delete  Delete  Delete	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDRI CITY-ST-ZIP	P/D SPRI 2933 MEL V/D LogL 452: ME T/D BAR 455: ME D KUHI 300: ME	ADDITIONS/CHANGE INKLE, TERRIL PEBBLE CRE BOURNE, FL  ILLO, MARIE L RIVERMIST LBOURNE, F  RETT CHA LBOURNE, F  LBOURNE, F  N, JOSEPH L PEBBLE CR	ESTO OFFICERS AN ANCE SEK ST. L 32935 T DR L 32935 RLES R. ST DR L 32935	D DIRECTORS IN  (12) Change  Change  Change	Addition  Addition  Addition	CB0E001 (40/00)

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.