


FILE NOW: FILING FEE IS \$61.25

FILED

May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N92000000337 (7)
1. Corporation Name
PEBBLE CREEK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 7800 PELICAN BAY BLVD. NAPLES FL 33963	Mailing Address 2786 W CROWN POINTE BLVD NAPLES FL 33982
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3. Date Incorporated or Qualified 11/16/1992		
4. FEI Number 65-0369388	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business 21 7600 Pelican Bay Blvd.	2a. Mailing Address 26 R i P Property Management
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 265 Airport Rd South
City & State 23 Naples, FL	City & State 28 Naples, FL
Zip 24 34108	Country 25
Country 29 34108	Zip 30 Collier

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. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**ROGER KRAMER & ASSOC.
2786 W CROWN POINTE BLVD
NAPLES FL 33982**

10. Name and Address of New Registered Agent

81 Name R i P Property Management	
82 Street Address (P.O. Box Number is Not Acceptable) 265 Airport Road South	
83	
84 City Naples	85 Zip Code FL 34108

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPT	NAME CORACE, RICHARD F	1.1 TITLE Treasurer/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 5551 RIDGEWOOD DR.	CITY-ST-ZIP NAPLES FL	1.2 NAME Sally Mazzola	
		1.3 STREET ADDRESS 7655 Pebble Creek Circle, #103	
		1.4 CITY-ST-ZIP Naples, FL 34108	
TITLE D	NAME RAOTKE, TRACY	2.1 TITLE SECRETARY/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7741 PEBBLE CREEK CIRCLE	CITY-ST-ZIP NAPLES FL	2.2 NAME JOANN WASYLENKO	
		2.3 STREET ADDRESS 7725 PEBBLE CREEK #302	
		2.4 CITY-ST-ZIP NAPLES FLORIDA 34108	
TITLE D	NAME ANDERSON, DONALD	3.1 TITLE DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7741 PEBBLE CREEK CIRCLE	CITY-ST-ZIP NAPLES FL	3.2 NAME GARY E SCHULTZ	
		3.3 STREET ADDRESS 7750 PEBBLE CREEK CIR #306	
		3.4 CITY-ST-ZIP NAPLES, FL 34108	
TITLE D	NAME BUTTERWORTH, BILL	4.1 TITLE VICE-PRESIDENT/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7741 PEBBLE CREEK CIRCLE	CITY-ST-ZIP NAPLES FL	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE D	NAME D'AQUANNE, JOHN	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7741 PEBBLE CREEK CIRCLE	CITY-ST-ZIP NAPLES FL	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE D	NAME MCINTYRE, ART	6.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7741 PEBBLE CREEK CIRCLE	CITY-ST-ZIP NAPLES FL	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sally Mazzola (Treasurer Pebble Creek Condo. Assoc.) 4/6/98 941 514 3214

CFR2037 (10/97)