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May 22 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N96000000693 (9)

1. Corporation Name

PEBBLE RIDGE HOME OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

10080 PEBBLE RIDGE DR. N.  
JACKSONVILLE FL 32220

10080 PEBBLE RIDGE DR. N.  
JACKSONVILLE FL 32220

3. Date Incorporated or Qualified

02/05/1996

4. FEI Number

59-3372245

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEFFORDS, BLANE  
10080 PEBBLE RIDGE DR. N.  
JACKSONVILLE FL 32220

81 Name

Livengood, Barry

82 Street Address (P.O. Box Number is Not Acceptable)

10080 Pebble Ridge Dr. N

83

84 City

Jacksonville

FL

85 Zip Code

32220

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE

NAME JEFFORDS, BLANE  
STREET ADDRESS 10080 PEBBLE RIDGE DR. N.  
CITY-ST-ZIP JACKSONVILLE FL 32220

1.1 TITLE  Change  Addition

1.2 NAME Livengood, Barry  
1.3 STREET ADDRESS 10024 Pebble Ridge Dr. N  
1.4 CITY-ST-ZIP Jacksonville, FL 32220

TITLE  DELETE

NAME LIVENGOOD, BARRY  
STREET ADDRESS 10024 PEBBLE RIDGE DR. N.  
CITY-ST-ZIP JACKSONVILLE FL 32220

2.1 TITLE  Change  Addition

2.2 NAME Goodroe, Kenn  
2.3 STREET ADDRESS 10003 Plank Lane  
2.4 CITY-ST-ZIP Jacksonville, FL 32220

TITLE  DELETE

NAME FAULK, JOANN  
STREET ADDRESS 1180 PEBBLE RIDGE CT  
CITY-ST-ZIP JACKSONVILLE FL 32220

3.1 TITLE  Change  Addition

3.2 NAME Lowell, Serrery  
3.3 STREET ADDRESS 10071 Pebble Ridge Dr. N  
3.4 CITY-ST-ZIP Jacksonville, FL 32220

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME 200002535142  
6.3 STREET ADDRESS -05/26/98--01046--016  
6.4 CITY-ST-ZIP \*\*\*61.25

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

Barry Livengood

4-11-98

CR2E037 (10/97)