

2002 UNIFORM BUSINESS REPORT (UBR)

5/2

FILED
Jun 10, 2002 8:00 am
Secretary of State

05-21-2002 91151 013 ****61.25

DOCUMENT # N98000000271

1. Entity Name

PEBBLEBROOKE LAKES MASTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

255 EAST DRIVE #D
 MELBOURNE, FL 32904

255 EAST DRIVE, #DD
 MELBOURNE, FL 32904

94110

2. Principal Place of Business

8310 Big Acorn Circle #1001

3. Mailing Address

8310 Big Acorn Circle #1001

Suite, Apt. #, etc.

#1001

Suite, Apt. #, etc.

#1001

City & State

Naples, FL 34119

City & State

Naples, FL 34119

4. FEI Number

59-3526884

Applied For

Not Applicable

Zip

34119

Country

Zip

34119

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~Kenneth P. Saundry, Jr.~~
~~255 East Drive, #D~~
~~Melbourne, FL 32904~~

7. Name and Address of New Registered Agent

Name

same

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

8310 Big Acorn Circle

#1001

City

Naples

FL

Zip Code

34119

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. State Fee Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	Kenneth P. Saundry, Sr.	255 East Drive, #D	Melbourne, FL 32904	<input type="checkbox"/>
STD	Kenneth P. Saundry, Jr.	255 East Drive, #D	Melbourne, FL 32904	<input type="checkbox"/>
D	Karen Rosborough	255 East Drive, #D	Melbourne, FL 32904	<input type="checkbox"/>
D	Janice M. Saundry	255 East Drive, #D	Melbourne, FL 32904	<input type="checkbox"/>
VD	George Vukobratovich	2400 9th Street N, Suite 101	Naples, FL 34119	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				Address
		8310 Big Acorn Circle, #1001	Naples, FL 34119	<input checked="" type="checkbox"/>
		8310 Big Acorn Circle, #1001	Naples, FL 34119	<input checked="" type="checkbox"/>
		8310 Big Acorn Circle, #1001	Naples, FL 34119	<input checked="" type="checkbox"/>
		8310 Big Acorn Circle, #1001	Naples, FL 34119	<input checked="" type="checkbox"/>
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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.

SIGNATURE: *Karen Rosborough* Karen Rosborough

4/30/02

941-348-3062

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #