

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P94000060596 (1)
 1. Corporation Name
PEBBLE CREEK PLACE, INC.



Principal Place of Business: **3005 CARING WAY PORT CHARLOTTE FL 33952**
 Mailing Address: **3005 CARING WAY PORT CHARLOTTE FL 33952-5339**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	28100 N JONES LOOP RD	26	P.O. BOX 511255	08/16/1994	04/11/1996
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		4. FEI Number	Applied For
23. City & State		28. City & State		65-0527070	Not Applicable
24. Zip	Country	29. Zip	Country	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
33982	CHARLOTTE	33951	CHARLOTTE	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

8. Name and Address of Current Registered Agent: **SLACK, JAMES D 3005 CARING WAY PORT CHARLOTTE FL 33952**

10. Name and Address of New Registered Agent:
 81 Name: **WILLIAM J. SUTTON**
 82 Street Address (P.O. Box Number is Not Acceptable): **28100 N. JONES LOOP ROAD**
 83 City: **PUNTA GORDA** **FL** 85 Zip Code: **33982**

11. Pursuant to the provisions of Sections 607.042 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 607.0505, Florida Statutes.

SIGNATURE: *William J. Sutton* DATE: **4/21/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SLACK, JAMES D	1.2 NAME	SUTTON, WILLIAM J.
STREET ADDRESS	3005 CARING WAY	1.3 STREET ADDRESS	28100 N. JONES LOOP RD
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	1.4 CITY-ST-ZIP	PUNTA GORDA, FL. 33982
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	TREASURY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUTTON, WELLINGTON J	2.2 NAME	SUTTON, WELLINGTON J.
STREET ADDRESS	P.O. BOX 1255 (N/A)	2.3 STREET ADDRESS	P.O. BOX 511255
CITY-ST-ZIP	PUNTA GORDA FL 33951	2.4 CITY-ST-ZIP	PUNTA GORDA, FL. 33951-1255
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	VICE PRES: <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WHARTON, ROBERT L	3.2 NAME	SUTTON, CHARLES, R.
STREET ADDRESS	R.D. 9, BOX 221	3.3 STREET ADDRESS	275 RIDGEWAY DRIVE
CITY-ST-ZIP	BUCKHANNON WV 26201	3.4 CITY-ST-ZIP	BRIDGEPORT, WV 26330
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	SUTTON, FRANKLIN L
STREET ADDRESS		4.3 STREET ADDRESS	113 CIMARRON ROAD
CITY-ST-ZIP		4.4 CITY-ST-ZIP	CLARKSBURG, WV 26301
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William J. Sutton* DATE: **4/21/97** **941-639-7470**

CR2E034 (9/96)