## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 732091** 

Entity Name: PEBBLE BEACH VILLAS, INC.

**Current Principal Place of Business:** 

5100 NORTH A1A

VERO BEACH, FL 32963

**Current Mailing Address:** 

835 20TH PLACE

VERO BEACH, FL 32960 US

FEI Number: 59-1646626 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W 3055 CARDINAL DRIVE SUITE 302

VERO BEACH, FL 32963 US

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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 29, 2016

**Secretary of State** 

CC4939506640

Officer/Director Detail:

VΡ Title Title S

TSOUTSOURAS, BETTE DOWHAN, CATHERINE Name Name

Address 5100 NORTH A1A #G53 Address 5100 N A1A #A4

VERO BEACH FL 32963 City-State-Zip: City-State-Zip: VERO BEACH FL 32963

Title Title

JAKELIS, ALBERT Name Name HANSEN, SUSAN

Address 5100 NORTH A1A #E46 Address 5100 N A1A # E41

City-State-Zip: VERO BEACH FL 32963 City-State-Zip: VERO BEACH FL 32963

Title **PRESIDENT** Title **TREASURER** 

MCCREA, RALPH Name Name GARDELL, ROBERT

Address 5100 N A1A Address 5100 N A1A #E44 #C22

City-State-Zip: VERO BEACH FL 32963 City-State-Zip: VERO BEACH FL 32963

Title **DIRECTOR** 

Name RODGERS, BUD

5100 N A1A Address

#F64

City-State-Zip: VERO BEACH FL 32963

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

04/29/2016 SIGNATURE: RALPH MCCREA **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date