2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746339

Entity Name: PEBBLE SPRINGS CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 19, 2014
Secretary of State
CC6416008938

Current Principal Place of Business:

8751 W BROWARD BLVD

400

PLANTATION, FL 33324

Current Mailing Address:

P.O. BOX 19439

PLANTATION, FL 33318 US

FEI Number: 59-1745077 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEINBERG, STEVEN AESQ 7805 SW 6 COURT PLANTATION, FL 33324 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

Officer/Director Detail:

Title DP Title DST

Name WAYNE, MICHAEL Name TAYLOR, PATRICIA M

Address 3990 NW 88 AVE #2D Address 4060 NW 88TH AVENUE #2F

City-State-Zip: SUNRISE FL 33351 City-State-Zip: SUNRISE FL 33351

Title D Title D

 Name
 DARLINGTON, SHERON E.
 Name
 BLACK, SHARON

 Address
 4006 NW 88 AVE #1C
 Address
 4004 NW 88 AVE #1B

 City-State-Zip:
 SUNRISE FL 33351
 City-State-Zip:
 SUNRISE FL 33351

Title D Title DIR

Name DELARO, HOLLY S. Name MALONE, MARJORIE E

Address 4054 NW 88 AVE #1B Address 3990 NW 88 AVE

#2-C

City-State-Zip: SUNRISE FL 33351 City-State-Zip: SUNRISE FL 33351

Title DIR Title DIR

Name MICOLTA, MARIA P Name PLUMMER, SHAFRONIA

Address 4040 NW 88 AVE Address PO BOX 26464

#1-C Address PO BOX 20404

City-State-Zip: SUNRISE FL 33351 City-State-Zip: TAMARAC FL 33320-6464

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.

SIGNATURE: MICHAEL WAYNE PRESIDENT 01/19/2014