#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 746339** 

Entity Name: PEBBLE SPRINGS CONDOMINIUM ASSOCIATION, INC.

**FILED** Mar 24, 2015 **Secretary of State** CC9484768621

### **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:

2-F

Title DST Title D/VP

TAYLOR, PATRICIA M DARLINGTON, SHERON E. Name Name

1-C

D/PRES

Address 4060 NW 88TH AVE Address 4006 NW 88 AVE

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

Title Title D DIR

Name DELARO, HOLLY S. Name PALEZEWSKI, KAREN

4006 NW 88 AVE Address 4054 NW 88 AVE #1B Address

SUNRISE FL 33351

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

Title DIR

Name BLACK, ROSE SHARON GARJI, AVINOAM Name

9801 SUNRISE LAKES BLVD Address Address 2646 POLK STREET 105

SUNRISE FL 33322

City-State-Zip: HOLLYWOOD FL 33020 City-State-Zip:

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.

Title

03/24/2015 SIGNATURE: AVINOAM GARJI **PRESIDENT**