

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010255

**Entity Name:** PEBBLEBROOK HOA, INC.

**Current Principal Place of Business:**

C/O 381 N. KROME AVE  
SUITE 205  
HOMESTEAD, FL 33030

**FILED**  
**Apr 21, 2024**  
**Secretary of State**  
**0873855856CC**

**Current Mailing Address:**

ALTON MADISON PROPERTY MGMT  
381 N. KROME AVE SUITE 205  
MIAMI, FL 33030 US

**FEI Number:** 20-1199491

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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:** MARIA V. ARIAS

04/21/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR	Title	VP, TREASURER, DIRECTOR
Name	TAVITIAN, RAFFI	Name	SAUCER, LOGAN
Address	381 N. KROME AVE SUITE 205	Address	381 N. KROME AVE SUITE 205
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030
Title	PRESIDENT, DIRECTOR	Title	DIRECTOR, SECRETARY
Name	SARCAR, ERIC	Name	ALVAREZ, ARACELY
Address	381 N. KROME AVE SUITE 205	Address	ALTON MADISON PROPERTY MGMT 381 N. KROME AVE SUITE 205
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	MIAMI FL 33030
Title	DIRECTOR		
Name	LAGEYRE LOZANO, GABRIEL		
Address	381 N KROME AVENUE SUITE 205		
City-State-Zip:	HOMESTEAD FL 33030		

*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:** ERIC SARCAR

PRESIDENT

04/21/2024

Electronic Signature of Signing Officer/Director Detail

Date