

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43847

FILED
Feb 04, 2015
Secretary of State
CC1242099164

Entity Name: PEBBLE CREEK OF MELBOURNE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4553 RIVERMIST DRIVE
MELBOURNE, FL 32935

Current Mailing Address:

P.O. BOX 410553
MELBOURNE, FL 32941-0553 US

FEI Number: 59-3111985

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEMM, RUSSELL E
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751 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 PRESIDENT, DIRECTOR
Name CROCKER, LEON
Address 2942 PEBBLE CREEK STREET
City-State-Zip: MELBOURNE FL 32935

Title VP, DIRECTOR
Name CHAMPAGNE, HENRY
Address 4534 RIVERMIST DRIVE
City-State-Zip: MELBOURNE FL 32935

Title TREASURER, DIRECTOR
Name COX, MANDY
Address 4553 RIVERMIST DRIVE
City-State-Zip: MELBOURNE FL 32935

Title CORRESPONDING SECRETARY
Name GUNDERSON, TORLEIF
Address 4551 PEBBLE CREEK STREET
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name NOWAK, JOHN
Address 4566 RIVERMIST DRIVE
City-State-Zip: MELBOURNE FL 32935

Title CORRESPONDING SECRETARY,
DIRECTOR
Name BENEDICT, REX
Address 3014 PEBBLE CREEK STREET
City-State-Zip: MELBOURNE FL 32935

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: MANDY COX

TREASURER

02/04/2015

Electronic Signature of Signing Officer/Director Detail

Date