

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 459566

Entity Name: PEB ASSOCIATES, INC.

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

9614 MAYWOOD DRIVE
WINDERMERE, FL 34786 US

New Principal Place of Business:

Current Mailing Address:

20 N. ORANGE AVE.
SUITE 600
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-1562041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRY, STONER, CALANDRINO & BROWN, P.A.
20 N. ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

HENDRY, STONER & BROWN, P.A.
20 N. ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 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: HENDRY, STONER & BROWN, P.A.

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLOUSTEIN, PETER,
Address: 9614 MAYWOOD DRIVE
City-St-Zip: WINDERMERE, FL

Title: VPD () Delete
Name: GRANT, ARLYN
Address: 218 HIGHLANDS RIDGE LANE
City-St-Zip: DAVENPORT, FL 33897

Title: STD () Delete
Name: NISKANEN, RACHEL
Address: 16214 ARROWDEAD TR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER E. BLOUSTEIN

PD

02/17/2009

Electronic Signature of Signing Officer or Director

Date