


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90050 012 ****61.25

DOCUMENT # 729736		
1. Entity Name PEBBLE SPRINGS CONDOMINIUM ASSOCIATION OF BRADENTON, INC.		

Principal Place of Business PEBBLE SPRINGS CONDOMINIUM 6201 WEST MANATEE AVE. BRADENTON, FL 34209	Mailing Address P.O BOX 10674 BRADENTON, FL 34282 US
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40007639



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01052005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1583633

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C&S CONDO MGMNT SERV INC 4301 32ND ST. W. SUITE #E14 SUITE A-19 BRADENTON, FL 34205		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	SD	<input checked="" type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	KELLEY, JOHN			NAME	RAY HALL		
STREET ADDRESS	5918 7TH AVENUE, WEST			STREET ADDRESS	5966 7TH AVE. W.		
CITY-ST-ZIP	BRADENTON, FL 34209			CITY-ST-ZIP	BRADENTON, FL 34209		
TITLE	TD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHENDORF, ELAINE			NAME			
STREET ADDRESS	6138 7TH AVE N.			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 34209			CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PETERSON, RUBY			NAME	RUBY PETERSON		
STREET ADDRESS	6226 7TH AVE. W.			STREET ADDRESS	6226 7TH AVE. W.		
CITY-ST-ZIP	BRADENTON, FL 34209			CITY-ST-ZIP	BRADENTON, FL 34209		
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HEDINGER, JOHN			NAME			
STREET ADDRESS	6325 MANATEE AVE W			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 34209			CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	CONN, KATIE			NAME	KATY CONN		
STREET ADDRESS	6004 7TH AVENUE W			STREET ADDRESS	6004 7TH AVE. W.		
CITY-ST-ZIP	BRADENTON, FL 34209			CITY-ST-ZIP	BRADENTON, FL 34209		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John L. McKin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20 JAN 2005

Date

Daytime Phone