2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#746339

FILED Apr 28, 2009 Secretary of State

Entity Name: PEBBLE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8360 W. OAKLAND PARK BLVD 1133 SOUTH UNIVERSITY DRIVE

#301 #211

SUNRISE, FL 33351 PLANTATION, FL 33324

New Mailing Address: Current Mailing Address:

P.O. BOX 452199 P.O. BOX 19439

FORT LAUDERDALE, FL 33345 PLANTATION, FL 33318 US US

FEI Number: 59-1745077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WEINBERG, STEVEN A ESQ 7805 SW 6 COURT PLANTATION, FL 33324

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP (X) Change () Addition () Delete

DARLINGTON, SHARON DARLINGTON, SHARON Name: Name: 4006 NW 88TH AVE #1-D Address: 4006 NW 88TH AVE #1-D Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: () Delete Title: (X) Change () Addition BROWN, MARY ELLEN Name: PLUMMER, SHAFRONIA Name:

Address: 4054 NW 88TH AVE #1-A Address: 4054 NW 88TH AVE 2-B City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: () Delete Title: () Change () Addition

TAYLOR, PAT Name: Name: 4060 NW 88TH AVENUE #2F Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip:

(X) Change () Addition Title: () Delete Title: PD

Name: CASWELL, PAULA Name: WAYNE, MICHAEL Address: 4040 NW 88TH AVE. #2C Address: 3990 N.W. 88TH AVE -2-D City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: PD () Delete Title: (X) Change () Addition

BLAKE, ANGELA BLAKE, ANGELA Name: Name: 4062 NW 88TH AVE #2-D 4062 NW 88TH AVE #2-D Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA TAYLOR SD 04/28/2009