2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOGUMENT # N00785 1. Entity Name PEBBLE CREEK VILLAS OWNERS ASSOCIATION, INC.					۸.,	67 NOV 26	LED 5 PM S	5: 21	
901 NW 9TH AVE 4-6		Mailing Address 901 NW 8TH AVE A-6 GAINESVILLE, FL 32601	US		11:27-00 11:27-00	SECRETAF TALLAHASS	RY OF S See. Fl.C	TATÉ Drida	
2. Principal Place of Business - No P.O. Box # 5522 NW 43 S7. Suite. Apt. #, etc.		3. Mailing Address 5522 NW 43 57. Suite, Apt. #, etc.			10262007	Chg-NP	CR2E03	7 (12/06)	
City & Stat		City & State GAINES VILLE	PL		4. FEI Number 59-24145			Ar	oplied For ot Applicable
326	Country US - 6:-Name and Address of Current F	32653	Country		5. Certificate of	Status Desired	<u> </u>	\$8.75 Add Fee Require	
			Name	0.5					
WILSON, SALLY A C/O SUN LU PROPERTIES INC 901 NW 8TH AVE STE A-6			Street Address (P.O. Box Number is Not Acceptable) YO BOSSHARDT PROPERTY MANAGEMENT INC.						
GAINESVI	ILLE, FL 32601		City	22 N	IW 43 5	7. STE B	9	Zip Cod	e
	named entity submits this statement for		64	MAE	SV/LLE		<u> </u>	Zip Cod	<u>53 </u>
SIGNATURE .	DUS THO	voluntett, c	AM			10	. 29.	-07	
	Signature, lyded or orinted had e of registered agent a		gisterep Agent signat			<u> </u>	DATE		
	Amended AR is \$61.25	9. Election Campai Trust Fund Cont	ign Financing ribution.		\$5.00 May Be Added to Fees	Ma Flori	ake check ida Depari	payable to	tate
10. IIILE NAME SIREEI ADDRESS CITY-SI-ZIP		9. Election Campai Trust Fund Cont	ign Financing	D MA 273	\$5.00 May Be Added to Fees DDITIONS/CHAN YN/ARD 35 NH 3	Flori GES TO OFFICER H/SS O DRIVE	ake check ida Depart	payable to ment of St RECTORS IN Change	tate
10. TIFLE NAME STREET ADDRESS	Amended AR is \$61.25 OFFICERS AND DIRI TD TJIAM, FRANCISCA 3927 N.W. 29 LANE GAINESVILLE, FL 32606 SD NEWSON, IRENE 3933 NW 27TH LN GAINESVILLE, FL 32606	9. Election Campai Trust Fund Cont	ign Financing ribution. 11. IIILE NAME STREEL ADDRESS	D MA 273 GA 50 IRE	\$5.00 May Be Added to Fees DDITIONS/CHAN	Flori GESTO OFFICER HISS RORIVE E,FL. 3.	ake check ida Depari	payable to ment of St RECTORS IN Change	tate
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10. IIILE NAME SIREEI ADDRESS CITY-SI-ZIP HILE NAME SIREEI ADDRESS CITY-SI-ZIP HILE NAME SIREEI ADDRESS SIREEI ADDRESS	Amended AR is \$61.25 OFFICERS AND DIRI TD TJIAM, FRANCISCA 3927 N.W. 29 LANE GAINESVILLE, FL 32606 SD NEWSON, IRENE 3933 NW 27TH LN GAINESVILLE, FL 32606 PD SCHUELLER, ROBERT 3936 NW 29 LANE	9. Election Campai Trust Fund Cont ECTORS Delete	ign Financing vibution. 11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MA 273 GA 50 IRE	\$5.00 May Be Added to Fees DDITIONS/CHAN YNARD 35 NW 3 INES YILL INE NEW 3 NW 2 INES YILL	FIGURE 15 CANES 15 P. 32	ake check ida Depart RS AND DIF	payable to the	1 10 Addition
III.E NAME SIREEI ADDRESS CITY-SI-ZIP HILE NAME SIREEI ADDRESS	Amended AR is \$61.25 OFFICERS AND DIRI TD TJIAM, FRANCISCA 3927 N.W. 29 LANE GAINESVILLE, FL 32606 SD NEWSON, IRENE 3933 NW 27TH LN GAINESVILLE, FL 32606 PD SCHUELLER, ROBERT 3936 NW 29 LANE GAINESVILLE, FL 32606 PD TURNER, THOMAS 2441 NW 43 ST 26B	9. Election Campai Trust Fund Cont ECTORS Delete Delete	ign Financing vibution. 11. IIILE NAME STREEL ADDRESS CITY-ST-ZIP IILE NAME STREEL ADDRESS STREEL ADDRESS	D MA 273 GA 50 IRE 393	\$5.00 May Be Added to Fees DDITIONS/CHAN YNARD 35 NW 3 INES YILL INE NEW 3 NW 2 INES YILL	FIGURE 15 CANES 15 P. 32	ake check ida Depart RS AND DIF	payable to the	Addition Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that it 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. Irem M. Newsone, Secretary CICMATHDE!

10/29/07