

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009199

FILED
Apr 21, 2009
Secretary of State

Entity Name: PEBBLEBROOKE COMMERCIAL PHASE IV PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2375 TAMIAMI TRAIL N
SUITE 210
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

2375 TAMIAMI TRAIL N
SUITE 210
NAPLES, FL 34103

New Mailing Address:

FEI Number: 26-0106189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREY, JAMES F III
2375 TAMIAMI TRAIL N
SUITE 210
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DEANGELIS, JOHN M
Address: 2316 HARRIER RUN
City-St-Zip: NAPLES, FL 34105

Title: DVT () Delete
Name: DIAMOND, DAVID B
Address: 28650 ALTESSA WAY #201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS () Delete
Name: DEANGELIS, RAYMOND
Address: 4229 CUTLASS LN.
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: ALLEN, CHRIS
Address: 565 HICKORY RD.
City-St-Zip: NAPLES, FL 34108

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:

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

SIGNATURE: RAYMOND DEANGELIS

DS

04/21/2009

Electronic Signature of Signing Officer or Director

Date