

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006424

FILED
Mar 21, 2012
Secretary of State

Entity Name: PEBBLE BROOKE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 13089
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 26-0611975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHINEHEART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: P
Name: COOKE, DOUGLAS
Address: 668 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: VP
Name: FORSMAN, NEAL
Address: 783 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: S/T
Name: JONES, ROSHANDRA
Address: 790 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: D
Name: JONES, KEREEN
Address: 511 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

Title: D
Name: WILLIAMS, MARVIN
Address: 451 BROOKE MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT S. RHINEHART

RA

03/21/2012

Electronic Signature of Signing Officer or Director

Date