2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State **DOCUMENT # N15384** 1. Entity Name PEBBLE CREEK OFFICE CONDOMINIUM ASSN., INC. Principal Place of Business Mailing Address 2811 NW 41 ST STE A 2811 NW 41 ST STE A 2811 NW 41ST. ST., SUITE A 2811 NW 41ST. ST., SUITE A GAINESVILLE, FL 32606-6649 GAINESVILLE, FL 32606-6649 03212006 No Chg-NP CR2E037 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2726221 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCARBOROUGH, EARL M. DO NOT WRITE 2811 NW 41 ST STE A SUITE A IN THIS SPACE GAINESVILLE, FL 32606 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) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 П Trust Fund Contribution. Added to Fees Due by May 1, 2006 OFFICERS AND DIRECTORS 10. TITLE SCARBOROUGH, EARL M. STREET ADDRESS 2811 NW 41 ST STE A CITY-ST-ZIP GAINESVILLE, FL U00000513722 04/29/06-80143-004 61.25 TITLE NÁME THOMPSON, DOUGLAS H. STREET ADDRESS 2811 N W 41 ST STE C CITY-ST-ZIP GAINESVILLE, FL TITLE NAME SCARBOROUGH, RICHARD E. STREET ADDRESS 2811 NW 41 ST STE A DO NOT WRITE CITY-ST-ZIP GAINESVILLE, FL TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 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 otherlijke empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

Ano. Downsey

414106

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