

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44772

FILED  
Jan 23, 2007  
Secretary of State

**Entity Name:** PEBBLE CREEK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2710 PEBBLE CREEK PLACE  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

2710 PEBBLE CREEK PL  
PORT CHARLOTTE, FL 33948 US

**New Mailing Address:**

**FEI Number:** 65-0611992

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNGOVAN, ROBERT  
2511 PEBBLE CREEK PLACE  
PORT CHARLOTTE, FL 33948 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: PD ( ) Delete  
Name: MUNGOVAN, ROBERT  
Address: 2511 PEBBLE CREEK PLACE  
City-St-Zip: PT CHARLOTTE, FL 33948

Title: ST ( ) Delete  
Name: CAMPIONE, BENJAMIN  
Address: 2460 PEBBLE CREEK PL  
City-St-Zip: PT CHARLOTTE, FL 33948

Title: D ( ) Delete  
Name: WALCZAK, ROBERT  
Address: 2531 PEBBLE CREEK PLACE  
City-St-Zip: PORT CHARLOTTE,, FL 33948

Title: D ( ) Delete  
Name: MARRAPODI, JOSEPH  
Address: 2660 PEBBLE CREEK PLACE  
City-St-Zip: PORT CHARLOTTE, FL 33948

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DALLAS, JOHN  
Address: 2700 PEBBLE CREEK PLACE  
City-St-Zip: PORT CHARLOTTE,, FL 33948

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT MUNGOVAN

PD

01/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date