

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90256 029 ****61.25

DOCUMENT # N97000003164

1. Entity Name
PEBBLE CREEK AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
1633 E VINE STREET
SUITE 110
KISSIMMEE, FL 34744

Mailing Address
1633 E VINE STREET
SUITE 110
KISSIMMEE, FL 34744

54035972



2. Principal Place of Business

52 E. South Street
Suite, Apt. #, etc.

3. Mailing Address

52 E. South Street
Suite, Apt. #, etc.

03292004 Chg-NP CR2E037 (10/03)

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32801

Country

USA

Zip

32801

Country

USA

4. FEI Number
59-3498607

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DON ASHER AND ASSOCIATES INC
52 EAST SOUTH STREET
ORLANDO, FL 32801-3396

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MORELLI, EDUARDO ☒ Delete
STREET ADDRESS 1104 TIMBERBEND CIRCLE
CITY-ST-ZIP ORLANDO, FL 32824

TITLE VPD
NAME RIOS, ANTHONY ☒ Delete
STREET ADDRESS 1243 HEATHER LAKE DR
CITY-ST-ZIP ORLANDO, FL 32824

TITLE STD
NAME RIVERA, ALICE ☒ Delete
STREET ADDRESS 1343 HEATHER LAKE DR
CITY-ST-ZIP ORLANDO, FL 32824

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD/TO
NAME RIVERA, ALICE ☒ Change ☐ Addition
STREET ADDRESS 1343 HEATHER LAKE DRIVE
CITY-ST-ZIP ORLANDO, FL 32824

TITLE VPD
NAME RIVERA, NANCY ☒ Change ☐ Addition
STREET ADDRESS 1361 IVY MEADOW DRIVE
CITY-ST-ZIP ORLANDO, FL 32824

TITLE SD
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 other like empowered.

SIGNATURE:

Alice Rivera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/04

Date

407-418-2320

Daytime Phone #