

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000271

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PEBBLEBROOKE LAKES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

4306 ARNOLD AVENUE  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 110339  
NAPLES, FL 34108 US

**New Mailing Address:**

FEI Number: 59-3526884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KUETER, BEVERLY  
4306 ARNOLD AVENUE  
NAPLES, FL 34104 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: VESPO, JEFFREY  
Address: 328 SPIDER LILY LANE  
City-St-Zip: NAPLES, FL 34119

Title: DVP ( ) Delete  
Name: ANDERHALT, RUSS  
Address: 225 BACKWATER COURT  
City-St-Zip: NAPLES, FL 34119

Title: DS ( ) Delete  
Name: PUGLISE, TERRY  
Address: 8626 PEBBLEBROOKE DRIVE  
City-St-Zip: NAPLES, FL 34119

Title: DT ( ) Delete  
Name: HOFFMAN, TODD  
Address: 240 BACKWATER COURT  
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete  
Name: BALON, MICHELLE  
Address: 284 BURNT PINE DRIVE  
City-St-Zip: NAPLES, FL 34119

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

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

Title: DVP (X) Change ( ) Addition  
Name: BALON, MICHELE  
Address: 284 BURNT PINE DRIVE  
City-St-Zip: NAPLES, FL 34119

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

Title: DT (X) Change ( ) Addition  
Name: FARESE, JIM  
Address: 260 BURNT PINE DRIVE  
City-St-Zip: NAPLES, FL 34119

Title: D (X) Change ( ) Addition  
Name: MAROON, JEFF  
Address: 259 BURNT PINE DRIVE  
City-St-Zip: NAPLES, FL 34119

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: JEFFREY VESPO

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date