## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9800002680

PEBBLEBROOKE LAKES HOMEOWNERS' ASSOCIATION NO. 1 , INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

255 EAST DRIVE **MELBOURNE FL 32904**  Mailing Address

255 EAST DRIVE MELBOURNE FL 32904

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90088 027 \*\*\*\*61.25

375052 - 90088 - 27

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

05/11/1998

59-3526912

4. FEI Number



23												
Zip	Cou 25	intry 29	Zip	30	Country		I	on Campaign F Fund Contribut	-	ב	•	May Be to Fees
24			<u> </u>	1301				and Address		stered A		
Name and Address of Current Registered Agent						Name						
SAUNDRY, KENNETH P JR.					82 Street Address (P.O. Box Number is Not Acceptable)							ĺ
255 EAST DRIVE								<del></del>				
MELBOUR	INE FL 32904				83							
		•			84	City	-			FL	85 Zip	Code
office or r agent. I a	registered agent, or b am familiar with, and a	Sections 617.0502 and oth, in the State of Flor accept the obligations of	ida. Such char	ide was authoi	uzea by:	ine corpo	corporation subm ration's board of	its this stateme directors, I her	ent for the pu eby accept the	rpose of one appoin	changing its trent as n	s registered egistered
SIGNATURE	Signature, typed or printed r	name of registered agent and titl	e if applicable.	(NOTE: Regis	stered Agen	signature re	quired when reinstating	}		DATE		
12.	<u> </u>	OFFICERS AND DIR			13.		ADDIT	ONS/CHANGE	S TO OFFIC	ERS AN		
TITLE	D ·			ELETE	1.1 TITLE						☐ Change	☐ Addition
NAME	SAUNDRY, KENN	ieth p Jr.			1.2 NAME			•	•			
STREET ADDRESS	ATT PLAT OF				1.3 STREET	ADDRESS				,	•	
CITY-ST-ZIP	MELBOURNE FL				1.4 CITY-ST	-ZIP			<u> </u>			
TITLE	D			ELETE	2.1 TITLE						Change	☐ Addition
NAME	SAUNDRY, KENN	IFTH P SR.		J	2.2 NAME	}		•				ļ
STREET ADDRESS					2.3 STREET	ADDRESS				•		ļ
CITY-ST-ZIP	MELBOURNE FL			,	2. 4 CITY-S	T-71P	_			_		
TITLE	D				3.1 TITLE						☐ Change	Addition
NAME	PACYGA, KAREN	1			3.2 NAME		KAREN	ROSBO	ROUG.	H	•	
STREET ADDRESS		•		}	3.3 STREET	ADDRESS	•					
CITY-ST-ZIP	MELBOURNE FL				3.4. CITY-S	ŀ	*					
TITLE	WILLDOOMAL I L	<u> </u>			4.1 TITLE	<del></del>	··				Change	Addition
NAME	1		_	ľ	4.2 NAME	l				•		
					4.3 STREET	ADDRESS						
STREET ADDRESS	<u>'</u>				4.4 CITY- S	L						•
CITY-ST-ZIP TITLE					5.1 TITLE	-215	<del></del>				Change	Addition
=			٠.		5.2 NAME	ł						
NAME	<u>}</u>	•			5.3 STREET	ADDRESS I						
STREET ADDRESS					5.4 CITY-S							
CITY-ST-ZIP	<u> </u>	<del></del> .			6.1 TITLE						Change	Addition
TITLE					6.2 NAME	[		•				
NAME		•		I	6.3 STREET	ADDRESS						
STREET ADDRESS	<b>}</b>			J		ļ						
CITY-ST-ZIP	<u> </u>				6.4 CITY-S		E 00-11-1 440 0	(7/3)/i) Ela-22-	Ctatutas 1 6	rdbor cod	ifu that the	information
14. I hereby	certify that the inform	ation supplied with this	filing does not	qualify for the	exempti	on stated	in Section 119.0	7(3)(i), Florida	Statutes. I fu	irther cert	ity that the	intormation

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 12 or Block 13 if changed, or in any alaxhment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #

CR2E037 (1.1/98)

Applied For

\$8.75 Additional

Fee Required

Not Applicable