## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000025440 (6) DOCUMENT #

PEBBLE CREEK UTILITIES, INC.

**FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 (00)(00) (01 100); 010(1 00); 0	#### #### #####	11111 21211 010		
200 WEATHERSFIELD AVENUE 2355 SNADERS RD										
ALIAMONIE	SPRINGS FL 32714	US	NORTHBROOK IL 60062 US			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
						04/04/1994				
2. Principal Pl	ace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	Applied For			
21	#	26				36-3980286		Not Applicable		
Suite, Apt.	#, <b>6</b> 10.	— <u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State	<u></u>		City & State			6. Election Campaign Financing		\$5.00	<del></del>	
23		<u> </u>	28			Trust Fund Contribution		Added t	.,	
Zip	Country Zip			Country	,	8. This corporation owes or has p	aid the curre	ent year ligt	angible	
24	25	29	30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of		nt		T .:	10. Name and Address of New R	egistered A	gent		
	CORPORATION SYSTEM			81	Name					
	00 PINE ISLAND ROAD					Street Address (P.O. Box Number is Not Acceptable)				
ru.	WITATION FL 33324			83	<u> </u>					
				84	City		FL	<b>85</b> Zip (	Code	
11. Pursuant t	to the provisions of Sections	607.0502 and 607.1508, F	lorida Statutes, the	abov	e-named corp	poration submits this statement for the	purpose of	hanging it	s registered	
office or re agent. I ar	egistered agent, or both, in the <b>fam</b> itiar with, and accept the	he State of Florida. Such c he obligations of, Section (	hange was author 107.0505, Florida S	ized by Statute:	y the corporat s.	tion's board of directors. I hereby acce	ept the appo	intment as	registered	
SIGNATURE		47								
	Signature, typed or printed name of req				kipot erutangia Inc	red when reinstating)	DATE OF DO AND	DIDECTOR	10.11110	
12.	CEO	ERS AND DIRECTORS		<b>3.</b> 1 TITLE		ADDITIONS/CHANGES TO OFFI		Change	Addition	
NAME	CAMAREN, JAMES			2 NAME						
STREET ADDRESS	2335 SANDERS RD			1.3 STREET ADDRESS						
CITY-ST-ZIP	NORTHBROOK IL		1.	4 CITY-9	51 - ZIP					
TITLE	VS		DELETE 2	1 TITLE			ı	Change	Addition	
NAME	DEMAREE, DAVID H		2	2 NAME						
STREET ADDRESS	2335 SANDERS RD		2.	3 STREE1	ADDRESS					
CITY-ST-ZIP	NORTHBROOK IL			4 CITY-	ST-ZIP			Change	Addition	
TITLE	SCHUMACHER, LAWR			.1 TITLE .2 NAME			l	Change	☐ Vagicon	
NAME STREET ADDRESS	2335 SANDERS RD	HIVE			ADDRESS					
CITY-ST-ZIP	NORTHBROOK IL			3.4. CITY - ST - ZIP						
TITLE	VP DELFTE			4.1 TITLE				Change	Addition	
NAME	DOPUCH, ANDREW		4.	2 NAME						
STREET ADDRESS	2335 SANDERS RD		4.	3 \$1REE1	ADDRESS					
CITY-ST-ZIP	NORTHBROOK IL			4 CHTY - S	ST - ZIP			705	A # # # # # # # # # # # # # # # # # # #	
TITLE		Ļ		1 TITLE			ı	Change	Addition	
NAME				.2 NAME	1 DDDCCC					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		Г		.4 CITY - 9 .1 TITLE	DI-TIF		I	Change	Addition	
NAME		-		2 NAME			•	*		
STREET ADDRESS	•				ADDRESS					
CITY-ST-ZIP	_			4 CITY - 9						
	ortiby that the information ruy	apped with this filing done	not qualify for the	ovome	tion etated in	Section 110 07/3(i) Florida Statutes	Liturther cer	ify that the	information	

r nereby certify that the information for the information that the information indicated on this annual report or supplied with this interest 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 mystector powered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

3/6/98

847-498-6440