2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State
03-25-2002 90180 014 ****61.25

DOCUMENT # 725810

1. Entity Name

PELICAN YACHT CLUB, INC.

Principal Place of Business	Mailing Address
1120 SEAWAY DR FT PIERCE FL 34949 US	1120 SEAWAY DR FORT PIERCE FL 34949 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-0572390 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FEE, F. H. III 401-A SOUTH INDIAN RIVER DR. FT PIERCE FL 34950	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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPC DENNIS, DR. MICHAEL 165 S. SEWELLS POINT RD. SEWELLS POINT FL 34996	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPC MELVILLE, HAROLD 2940 S. 25th St. Ft. Pierce, FL 34981	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC MELVILLE, MR. HAROLD 2940 S. 25TH ST. FORT PIERCE FL 34981	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC GRAY, HARRY 505 S. 2nd St. Ft. Pierce, FL 34950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC MICHAEL, DR. DENNIS 165 S SEWALLS PT RD SEWALLS POINT FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC GORMAN, ROBERT 1209 Delaware Ave. Ft. Pierce, FL 34950	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT GRAY, HARRY 505 S 2ND ST SUITE 230 FT PIERCE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT FURST, WILLIAM 5212 Feather Creek Dr. Ft. Pierce, FL 34951	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS COKE, MR. RICHARD 1012 S. 8TH ST. FORT PIERCE FL 34950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS YATES, CAMILLE 2303 Oak Dr. Ft. Pierce, FL 34949	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RC MELVILLE, HAROLD 2940 S 25TH ST FT PIERCE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RC BRYANT, WILLIAM 1550 Old Dixie Hwy. Vero Beach, FL 32960	☐ Change ☒ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #