

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90131 012 ****61.25

DOCUMENT # 737973



1. Entity Name
PELICAN INLET CONDOMINIUM OWNERS ASSOCIATION, IN C.

Principal Place of Business
**7175 A1A SOUTH
F-141
ST AUGUSTINE FL 32086
US**

Mailing Address
**7175 A1A SOUTH
F-141
ST AUGUSTINE FL 32086
US**

2. Principal Place of Business
7175 A1A South

3. Mailing Address
7175 A1A South

Suite, Apt. #, etc.

City & State
St. Augustine, FL

City & State
St. Augustine, FL

Zip
32080

Country
USA

Zip
32080

Country
USA

4. FEI Number **59-1752998**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**LABELLO, DARYL
7175 A1A S
ST AUGUSTINE FL 32080**

7. Name and Address of New Registered Agent

Name
Marlene Hale

Street Address (P.O. Box Number is Not Acceptable)
**7175 A1A South
C116**

City
St. Augustine

State
FL

Zip Code
32080

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 *Marlene C Hale* **Marlene C Hale** **5-22-03**

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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LABELLO, DARYL 7175 A1A S ST AUGUSTINE FL 32080	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HALE, MARLENE 7175 A1A S ST AUGUSTINE FL 32080	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EADENS, SUE 4733 CHISWICK CT #101 LOUISVILLE KY 40207	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LITTLE, JOYCE 7175 A1A S. STE C ST. AUGUSTINE FL 32086	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SENMAN, ULLA 7175 A1A S ST AUGUSTINE FL 32080	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ACKLAND, MARGARET 7175 A1A S ST AUGUSTINE FL 32080	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Lance Pigeon 7175 A1A South, # A107 St. Augustine, FL 32080	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Marlene Hale 7175 A1A South, # C116 St. Augustine, FL 32080	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sue Eadens 4612 Beaver Road Louisville, KY 40207	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Joyce Little 7175 A1A South, # E230 St. Augustine, FL 32080	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Ulla Senman 7175 A1A South, # E134 St. Augustine, FL 32080	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ed Ruhs 7 Crandell Court Palm Coast, FL 32137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *Marlene C Hale* **Marlene C Hale** **5/12/03 (904) 97-3710**

CR2E037 (10/02)