

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752368

1. Entity Name

PELICAN LANDING CONDOMINIUM ASSOCIATION OF CHARL

Principal Place of Business

2700 N. BEACH ROAD
ENGLEWOOD FL 34223
US

Mailing Address

1927 BEACH ROAD
ENGLEWOOD FL 34223-5709
US

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

59-2135288

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

MANASOTA KEY REALTY, INC.
1927 BEACH ROAD
ENGLEWOOD FL 34223

Name SOUTH BAY PROPERTY MGMT.
Street Address (P.O. Box Number is Not Acceptable)
895 SO. INDIANA AVE
ENGLEWOOD FL.
City FL Zip Code 34223

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 FABIAN H. DANDANEY MANAGER Fabian Dandaneu 4/25/00
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 ☐ Delete
NAME PD
STREET ADDRESS HAYDEN, FRANK
CITY-ST-ZIP 8585 STRAWBERRY POINT ROAD
GRAWN MI 49637

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SD
STREET ADDRESS KNOX, ROBERT
CITY-ST-ZIP 2700 N. BEACH ROAD UNIT B 207
ENGLEWOOD FL 34223

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VPD
STREET ADDRESS FERGUSON, MARTIN
CITY-ST-ZIP 2700 N. BEACH ROAD UNIT E 201
ENGLEWOOD FL 34223

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME TD
STREET ADDRESS MARSHALL, PAUL
CITY-ST-ZIP 416 LANSBROOK DRIVE
VENICE FL 34292

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME D
STREET ADDRESS BALDERSON, DENISE
CITY-ST-ZIP 2700 N. BEACH ROAD UNIT D201
ENGLEWOOD FL 34223

TITLE ☐ Change ☒ Addition
NAME D LEO HUGHES
STREET ADDRESS 7001 PENINSULA DR.
CITY-ST-ZIP TRAVERSE CITY
MICH 49686

TITLE ☐ Delete
NAME D
STREET ADDRESS ROKNICH, MIRKO
CITY-ST-ZIP 2700 N BEACH ROAD
ENGLEWOOD FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00

Date

Daytime Phone #

CR2E037 (9/99)