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Feb 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 767625 (7)

1. Corporation Name
PELICAN BAY YACHT CLUB CONDOMINIUM, BUILDING B, INC.



Principal Place of Business Mailing Address
5901 SUN BLVD. SUITE#203 ST. PETERSBURG FL 33715
5901 SUN BLVD. SUITE#203 ST. PETERSBURG FL 33715-1194

3. Date Incorporated or Qualified 03/23/1983
3a. Date of Last Report 02/07/1996

2. Principal Place of Business 2a. Mailing Address

4. FEI Number 59-0475190 Applied For Not Applicable

21 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

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

22 City & State 28 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 29 Zip Country 30 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWTON, WILLIAM C
5901 SUN BLVD.
SUITE 203
ST. PETERSBURG FL 33715

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETED
NAME GARRETSON, MARTHA
STREET ADDRESS 5901 SUN BLVD. #203
CITY-ST-ZIP ST. PETERSBURG FL
TITLE VD DELETED
NAME MASHKIAN, JACK
STREET ADDRESS 5901 SUN BLVD. #203
CITY-ST-ZIP ST. PETERSBURG FL
TITLE TD DELETED
NAME BERRY, BRUCE
STREET ADDRESS 5901 SUN BLVD., #203
CITY-ST-ZIP ST. PETERSBURG FL
TITLE SD DELETED
NAME HELKE, CHARLES
STREET ADDRESS 5901 SUN BLVD., #203
CITY-ST-ZIP ST. PETERSBURG FL
TITLE D DELETED
NAME SPINKS, BILL
STREET ADDRESS 5901 SUN BLVD., #203
CITY-ST-ZIP ST. PETERSBURG FL
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/97 Date Daytime Phone # 0051132

CR2E037 (9/96)