

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 24, 2004 8:00 am
Secretary of State

08-09-2004 90009 031 ****61.25

DOCUMENT # N00000008468

1. Entity Name

PELICAN-PARK 6761-ASSOCIATION, INC.



Principal Place of Business

6761 W SUNRISE BLVD.
BAY #3
PLANTATION FL 33313

Mailing Address

6761 W SUNRISE BLVD
BAY #3
PLANTATION FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SAME

City & State

*#3
SAME*

Zip

Country

Zip

Country

4. FEI Number

65-1070442

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

Name

YORK MAYER PRES.

Street Address (P.O. Box Number is Not Acceptable)

6761 W SUNRISE BLVD #3

City

PLANTATION

FL

Zip Code

33313

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

[Signature]

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

8/2/04

DATE

**FILE NOW: FEE IS \$61.25
Due By September 8, 2004**

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	DP	<input checked="" type="checkbox"/> Delete
NAME	HUGINS, MICHAEL R	
STREET ADDRESS	2920 NW 107TH AVE.	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	MAYER, YORK	
STREET ADDRESS	6761 W SUNRISE BLVD., #3	
CITY-ST-ZIP	PLANTATION FL 33313	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GWALTNEY, TINA	
STREET ADDRESS	6761 W SUNRISE BLVD., #15	
CITY-ST-ZIP	PORT LAUDERDALE FL 33313	
TITLE	RENZO GANASSINI	<input type="checkbox"/> Delete
NAME	C761 W SUNRISE BLVD #1	
STREET ADDRESS	PLANTATION FL 33313	
CITY-ST-ZIP		
TITLE	STEVEN PACE	<input type="checkbox"/> Delete
NAME	8760 W SUNRISE BLVD #16	
STREET ADDRESS	PLANTATION FL 33313	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YORK MAYER *8/2/04* *9947911880*

Date

Daytime Phone #