2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004735

FILED Apr 24, 2007 Secretary of State

Entity Name: ARIELLE AT PELICAN MARSH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
1044 CAST #206 NAPLES, F						
Current Mailing Address:			New Mailir	New Mailing Address:		
1044 CAST #206 NAPLES, F		}				
FEI Number:	65-0826652	FEI Number Applied For ()	Number Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:		
SOUTHWEST PROPERTY MGMT. 1044 CASTERLLO DR. SUITE 206 NAPLES, FL 34103 US 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.						
SIGNATUR						
	Electronic	Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	V ()E FITZGERALD, ST 2250 ARIELLE, # NAPLES, FL 341	1704	Title: Name: Address: City-St-Zip:	P (X) Change () Addition FITZGERALD, STEVE 2250 ARIELLE DR., #1704 NAPLES, FL 34109		
Title: Name: Address: City-St-Zip:	D () E PATENAUDE, LE 2130 ARIELLE, # NAPLES, FL 341	309	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition VITALE, ALEX 2135 ARIELLE DR., #2410 NAPLES, FL 34109		
Title: Name: Address: City-St-Zip:	D () C CLUFF, ROY 2265 ARIELLE, # NAPLES, FL 341		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	TSD () CURLIN, CAL 2230 ARIELLE, #NAPLES, FL 341		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () E BROCK, JIM 2215 ARIELLE, # NAPLES, FL 341		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BROCK, JIM 2215 ARIELLE, #1201 NAPLES, FL 34109		
Title: Name: Address: City-St-Zip:	() [Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition PRIORE, RAY 2150 ARIELLE DRIVE., #507 NAPLES, FL 34109		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE FITZGERALD P 04/24/2007