FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000078984 (0)

PELICAN COVE MOTEL, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

144 WEST MARION AVE. PUNTA GORDA FL 33950 144 WEST MARION AVE. PUNTA GORDA FL 33950

FILED Jan 29 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5 00 uou Bo

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

11/12/1993 4. FE! Number

65-0457884

5. Certificate of Status Desired

Zip Country Zip	City & Stat	е	_	City & State				6. Election Campaign Financing \$5.00 May Be	
29 30 Personal Property Tax due June 30. Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 14. W. MARION AVE. 28. Street Address (P.O. Box Number is Not Acceptable) 14. W. MARION AVE. 28. Street Address (P.O. Box Number is Not Acceptable) 14. W. MARION AVE. 15. Street Address (P.O. Box Number is Not Acceptable) 14. W. MARION AVE. 15. Street Address (P.O. Box Number is Not Acceptable) 14. W. MARION AVE. 15. Street Address (P.O. Box Number is Not Acceptable) 14. W. MARION AVE. 15. Street Address (P.O. Box Number is Not Acceptable) 15. Street Address (P.O. Box	23		28					Trust Fund Contribution Added to Fees	4
LEONARD, F. RICHARD 144 W. MARION AVE PUNTA GORDA FL 33950 51 Name and Address of New Registered Agent 51 Name 52 Street Address (P.O. Box Number is Not Acceptable) 52 Street Address (P.O. Box Number is Not Acceptable) 53 53 54 54 55 55 55 55	<u> </u>	—	— — ·	P	_	intry			
LEONARD, F. RICHARD 144 W. MARION AVE. PUNTA GORDA FL 33950 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 Zip Code 88 City FL 85 Zip Code 89 Zip Code 80 Zip Code 80 Zip Code 80 Zip Code 80 Zip Code 81. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, 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, 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, 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, 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 a									4
LEOVARD, F. RICHARD 144 W. MARION AVE. PUNTA GORDA FL 33950 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City			rent negister	su Ayem		81	Name	10. Name and Address of New Registered Agent	-
PUNTA GORDA FL 33950 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent algorithms and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent algorithms are required when reinstalling) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INME LEONARD, VICKI R 12. NAME LEONARD, VICKI R 12. SASS SAN LORENZO DR. 13. STREET ADDRESS SIRSET ADDRESS SIRSET ADDRESS STREET ADDRESS 3855 SAN LORENZO DR. 14. Citry-St-Zip DUTTA GORDA FL 33950 22. STREET ADDRESS 3855 SAN LORENZO DR. 22. STREET ADDRESS 3856 SAN LORENZO DR. 3856 SAN LORENZO DR. 3856 SAN LORENZO DR. 3857 SAN LOR						Mairie			
Signature Sign						82 Street Address (P.O. Box Num		ess (P.O. Box Number is Not Acceptable)	1
### City ### Is It It It It It It It I	PUNTA GURDA FL 33950					83			-
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 office or registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and store of registered agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE D DELETE 1.1 ITILE D DELETE 1.3 STREET ADDRESS STREET ADDR									
11. Pursuant to the provisions of Sections 607/0502 and 607/1508, 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 lam familiar with, and accept the obligations of, Section 607/0505, Florida Statutes. SIGNATURE						84 City		85 Zip Code	1
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 and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstaling) DATE	11. Pursuant	to the provisions of Sections 607.	1502 and 607	1508 Florida Statut	es the a	oove	-named corn		-
SIGNATURE Signature, typed or printed name of registered spent and site if applicable. (NOTE: Registered Agent signature required when reinstating)	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								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	-	,	g				•		
NAME LEONARD, F. RICHARD 2.2 NAME 3855 SAN LORENZO DR. 2.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP DOCA GRANDE FL 33432 3.4 CITY-ST-ZIP CITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	SIGNATURE	Signature, typed or printed name of registered	agent and title if ap	plicable. (NOT	E: Registere	d Ager	nt signature require	ed when reinstating) DATE	-
NAME LEONARD, F. RICHARD 2.2 NAME 3855 SAN LORENZO DR. 2.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP DOCA GRANDE FL 33432 3.4 CITY-ST-ZIP CITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	12.	OFFICERS	AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	16/
NAME LEONARD, F. RICHARD STREET ADDRESS 3855 SAN LORENZO DR. CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D DELETE 3.1 TITLE D-Change Addition NAME FALTERBAUER, BENNO M STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 TITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP FUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	TITLE	_	-	DELETE 1.		ΠE		☐ Change ☐ Addition]은
NAME LEONARD, F. RICHARD 2.2 NAME 3855 SAN LORENZO DR. 2.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP DOCA GRANDE FL 33432 3.4 CITY-ST-ZIP CITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	NAME	LEONARD, VICKI R		1.2		AME	1		*
NAME LEONARD, F. RICHARD 2.2 NAME 3855 SAN LORENZO DR. 2.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP DOCA GRANDE FL 33432 3.4 CITY-ST-ZIP CITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	STREET ADDRESS	3855 SAN LORENZO DR.		1.3 5			ADDRESS		낊
NAME LEONARD, F. RICHARD 2.2 NAME 3855 SAN LORENZO DR. 2.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 2.4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP DOCA GRANDE FL 33432 3.4 CITY-ST-ZIP CITLE D Change Addition NAME TOOLAN, CLARA 4.2 NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	CITY - ST - ZIP	PUNTA GORDA FL 33950					-ZIP		2
STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 Z, 4 CITY-ST-ZIP TITLE D Change Addition NAME FALTERBAUER, BENNO M STREET ADDRESS CITY-ST-ZIP BOCA GRANDE FL 33432 TITLE D Change Addition 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP BOCA GRANDE FL 33432 TITLE D Change Addition Addition Change Addition Change Addition Addition Change Addition Addition AMME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	TITLE	D		☐ DELETE				☐ Change ☐ Addition	ᄗ
CITY-ST-ZIP	NAME	LEONARD, F. RICHARD		I		2.2 NAME			
TITLE D DELETE 3.1 TITLE Change Addition NAME FALTERBAUER, BENNO M 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition	STREET ADDRESS	3855 SAN LORENZO DR.			2.3 \$1	REET /	ADDRESS		
NAME	CITY-ST-ZIP	PUNTA GORDA FL 33950				2. 4 CITY-ST-ZIP			
STREET ADDRESS 580 N.E. SILVER LANE 3.3 STREET ADDRESS CITY-ST-ZIP BOCA GRANDE FL 33432 3.4. CITY-ST-ZIP TITLE D	TITLE	Đ		☐ DELETE		3.1 TITLE		Change Addition	1
CITY-ST-ZIP BOCA GRANDE FL 33432 3,4, CITY-ST-ZIP TITLE D DELETE 4,1 TITLE Change Addition NAME TOOLAN, CLARA 4,2 NAME STREET ADDRESS 144 W. MARION AVE. 4,3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4,4 CITY-ST-ZIP	NAME	FALTERBAUER, BENNO M			3.2 N	ME			
TITLE D DELETE 4.1 TITLE Change Addition NAME TOOLAN, CLARA 4.2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	STREET ADDRESS	580 N.E. SILVER LANE			3.3 ST	REET A	ADDRESS		
NAME TOOLAN, CLARA 4. 2 NAME STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	CITY-ST-ZIP	BOCA GRANDE FL 33432			3.4. C	ITY-SI	T-ZIP		
STREET ADDRESS 144 W. MARION AVE. 4.3 STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	TITLE	D		☐ DELETE		4.1 TITLE		Change Addition]
CITY-ST-ZIP PUNTA GORDA FL 33950 4.4 CITY-ST-ZIP	NAME	TOOLAN, CLARA			4. 2 N	AME			
	STREET ADDRESS	144 W. MARION AVE.			4.3 ST	REET A	ADDRESS		-
DEL CTE CARTES Addition	CITY-ST-ZIP	PUNTA GORDA FL 33950			4.4 C	TY-ST	- ZIP		
The State State State	TITLE			☐ DELETE	5.1 Ti	LE		☐ Change ☐ Addition]
NAME 5,2 NAME	NAME				5.2 NA	ME			
STREET ADDRESS 5.3 STREET ADDRESS	STREET ADDRESS				5,3 ST	aeet <i>A</i>	ADDRESS		
CITY - ST - ZIP 5.4 CITY - ST - ZIP	CITY-ST-ZIP		··	· · · · · · · · · · · · · · · · · · ·	5.4 CI	ry-st	- ZIP		
TITLE DELETE 6.1 TITLE Change Addition	TITLE			☐ DELETE	6.1 (1)	LE		Change Addition	
NAME 6.2 NAME	NAME]				6.2 NA	ME			
STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS				6.3 ST	REET A	ADDRESS		
CITY-ST-ZIP 6.4 CITY-ST-ZIP									
14. 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 annual report or suppliemental 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 proportion or the preceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in	14. I hereby of indicated	ertify that the information supplied on this annual report or supplementation of the	with this filing ntal annual rep	does not qualify for	or the exe	mpti i tha	on stated in S t my signature	Section 119.07(3)(i), Florida Statutes. I further certify that the information e shall have the same legal effect as if made under oath; that I am an income the same legal effect as if made under oath; that I am an income the same legal effect as if made under oath; that I am an income the same legal effect as if made under oath; that I am an income the same legal effect as if the same legal effect as its same legal eff	