

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90143 004 ***150.00

DOCUMENT # P99000075987

1. Entity Name

PELICAN COVE MOTEL, INC.

Principal Place of Business

**23275 BAYSHORE RD
PORT CHARLOTTE FL 33980**

Mailing Address

**23275 BAYSHORE RD
PORT CHARLOTTE FL 33980**

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

65-0944563

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

**THOMAS, JUDITH K
23275 BAYSHORE RD
PORT CHARLOTTE FL 33980**

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **THOMAS, HARRY J**
STREET ADDRESS **23275 BAYSHORE RD**
CITY-ST-ZIP **PORT CHARLOTTE FL 33980**

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

TITLE **D** ☐ Delete
NAME **THOMAS, JUDITH K**
STREET ADDRESS **23275 BAYSHORE RD**
CITY-ST-ZIP **PORT CHARLOTTE FL 33980**

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

TITLE ☐ Delete
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CITY-ST-ZIP ☐ Delete

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JUDITH K THOMAS
JUDITH K THOMAS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

7-15-2002

Date

Daytime Phone #

CR2E034 (4/02)

Attachment P990000075987/075297



PELICAN COVE MOTEL
23275 BAYSHORE ROAD
CHARLOTTE HARBOR, FL 33980

7-15-2002

Florida Dept. of State
Division of Corporations

This is the first notice I
received. THANK you for waiving
the late fee - as per phone call
7-15-2002. This fee has previously
been paid at the time it was received.
in previous years Thank You -
we are using a port Charlotte - FL
Address. with 33980-3212 - Zip Code.

PELICAN COVE MOTEL, INC.		816484 1343
23275 BAYSHORE RD CHARLOTTE HARBOR, FL 33980		
DATE 3-1-2001		
Department of State		\$ 150.00
one hundred & fifty dollars		
PAID TO		
FOR 0000015000		
3/08/01	1343	150.00