

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004550

FILED
Mar 23, 2004
Secretary of State**Entity Name:** ASCOT AT PELICAN LANDING HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104**New Principal Place of Business:**C/O KMA COMPANY
PO BOX 111802
NAPLES, FL 34108**Current Mailing Address:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104**New Mailing Address:**C/O KMA COMPANY
PO BOX 111802
NAPLES, FL 34108**FEI Number:** 65-0581232**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**R & P PROPERTY MGMT.
265 AIRPORT RD. S
NAPLES, FL 33942 US**Name and Address of New Registered Agent:**KMA COMPANY
PO BOX 111802
NAPLES, FL 34108 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.

SIGNATURE: HERB SOLOMON

03/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: KAUFMAN, WILLIAM
Address: 3790 ASCOT BEND CT
City-St-Zip: NAPLES, FL 34110**Title:** VPD () Delete
Name: BEAU REGARD, JOSEPH
Address: 250670 ASCOT LAKE CT
City-St-Zip: NAPLES, FL 34110**Title:** STD () Delete
Name: DI COSMO, TOLLY
Address: 3718 ASCOT BEND CT
City-St-Zip: NAPLES, FL 34110**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TD (X) Change () Addition
Name: KAUFMAN, WILLIAM
Address: 3790 ASCOT BEND CT
City-St-Zip: NAPLES, FL 34110**Title:** PD (X) Change () Addition
Name: BEAU REGARD, JOSEPH
Address: 250670 ASCOT LAKE CT
City-St-Zip: NAPLES, FL 34110**Title:** VPSD (X) Change () Addition
Name: CAMPANARO, NANCY
Address: 3729 ASCOT BEND CT.
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSEPH BEAUREGARD

PRES

03/23/2004

Electronic Signature of Signing Officer or Director

Date