2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # J47898

1. Entity Name



Aug 09, 2004 8:00 am Secretary of State 08-09-2004 90007 016 ***550.00

FILED

PELICAN COVE DEVELOPMENT CORPORATION						08-09-2004 90007 010 1 330.00					
Principal Plac	e of Business [†]	Mailing Addre	ess								
7655 W GULF TO LAKE HIGHWAY SUITE 14 CRYSTAL RIVER FL 34429 US		7655 W GULF TO LAKE HIGHWAY SUITE 14 CRYSTAL RIVER FL 34429 US									
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				MOORE CR2E034 (4/04)					
City & State		City & State			4. FE		59-275279	95		oplied For ot Applicable	
Zip	Country	Zip	С	Country	5. Ce	ertificate of	Status Desired		\$8.75 Adee Require		
	6. Name and Address of Current	Registered Ager	nt		7. Na	me and A	ddress of New	Registered A	gent		
			. * · · · · · · · · · · · · · · · · · ·	7. Name and Address of New Registered Agent							
765	STER, JAMES P 5 W. GULF TO LAKE HWY TE 14	•		Street Add	dress (P.O. 8o	x Number	is Not Acceptat	ole)	- Vande save		
	STAL RIVER FL 34429										
				City				FL	Zip Coo	le	
	named entity submits this statement fitions of registered agent.	or the purpose of	changing its regi	stered office or r	registered ager	nt, or both,	in the State of F	Florida. I am f	amiliar with	and accept	
SIGNATURE	Signature, typed of printed name of requirered agon										
	Organicale, 1950 or printed harrie or redistrated agon	t and title if applicable.	(NOTE: Heg	ristered Agent signature	e tednited wheu teiu	istating)		DATE		1	
		N - Sept. Fay. (a)						DATE			
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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 607, 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:

NG OFFICE OR DIRECTOR