

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755539

FILED  
Jun 18, 2008  
Secretary of State

Entity Name: PELICAN REEF CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1632 S BAYSHORE COURT  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

1632 S BAYSHORE COURT  
COCONUT GROVE, FL 33133

**New Mailing Address:**

FEI Number: 59-2140403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RUSSO, JOHN P  
1632 S BAYSHORE COURT, #403  
MIAMI, FL 33133      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: RUSSO, JOHN P  
Address: 1632 S BAYSHORE COURT, #403  
City-St-Zip: COCONUT GROVE, FL 33133

Title: TSD      ( ) Delete  
Name: ANDOLSEK, CHARLES M  
Address: 1632 S BAYSHORE COURT, #502  
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD      ( ) Delete  
Name: CABAN, PHILIP  
Address: 1632 S BAYSHORE COURT, #PH2  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D      ( ) Delete  
Name: WILSON, NORMAN  
Address: 1632 S BAYSHORE COURT, #302  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D      ( ) Delete  
Name: LYONS, PATRICIA  
Address: 1632 S BAYSHORE COURT, #303  
City-St-Zip: COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD      (X) Change ( ) Addition  
Name: STEEN, CONSTANCE  
Address: 1632 S BAYSHORE COURT, VILLA 1  
City-St-Zip: COCONUT GROVE, FL 33133

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES M ANDOLSEK

TSD

06/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date