#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 768330** 

Entity Name: PELICAN COVE TOWNHOUSE ASSOCIATION OF PERDIDO

KEY, INC.

## **Current Principal Place of Business:**

7196 SHARP REEF PENSACOLA, FL 32507

# **Current Mailing Address:**

7196 SHARP REEF

#5

PENSACOLA, FL 32507 US

FEI Number: 59-2871082 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FORD, JAMES S 7196 SHARP REEF

PENSACOLA, FL 32507 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:

Electronic Signature of Registered Agent

Date

**FILED** Feb 19, 2016

**Secretary of State** 

CC3291770730

### Officer/Director Detail:

Title TREASURER, DIRECTOR Title DIRECTOR FORD, JAMES S BLAKE, OWEN Name Name

7196 SHARP REEF ROAD #5 Address Address 7196 SHARP REEF ROAD #2 City-State-Zip: City-State-Zip: PENSACOLA FL 32507 PENSACOLA FL 32507

Title **DIRECTOR** Title DIRECTOR

MEICHNER, ROBERT Name WILLIAMS, GARY Name Address 8050 SPRING RUN ROAD 7196 SHARP REEF #4 Address City-State-Zip: FAIRHOPE AL 36532 City-State-Zip: PENSACOLA FL 32507

Title DIRECTOR Name SMITH, SUSAN Address 14620 RIVER ROAD PENSACOLA FL 32507 City-State-Zip:

I hereby 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 all other like empowered.

SIGNATURE: JAMES S. FORD

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

02/19/2016