

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005470

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC5091441612**

**Entity Name:** PELICAN BAY ESTATES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O LYNX PROPERTY SERVICES, LLC  
12485 SW 137 AVENUE SUITE 309  
MIAMI, FL 33186

**Current Mailing Address:**

C/O LYNX PROPERTY SERVICES, LLC  
12485 SW 137 AVENUE SUITE 309  
MIAMI, FL 33186 US

**FEI Number:** 20-1686951

**Certificate of Status Desired:** No

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

LAW OFFICE OF FRANK PEREZ-SIAM  
7001 SW 87 COURT  
MIAMI, FL 33173 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:** FRANK PEREZ-SIAM

02/23/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ALONSO, DAVID  
Address        C/O LYNX PROPERTY SERVICES, LLC  
                  12485 SW 137 AVENUE SUITE 309  
City-State-Zip: MIAMI FL 33186

Title            VP  
Name            GALDOS, ROLAND  
Address        C/O LYNX PROPERTY SERVICES, LLC  
                  12485 SW 137 AVENUE SUITE 309  
City-State-Zip: MIAMI FL 33186

Title            TREASURER  
Name            WU, LIJIA  
Address        C/O LYNX PROPERTY SERVICES, LLC  
                  12485 SW 137 AVENUE SUITE 309  
City-State-Zip: MIAMI FL 33186

Title            SECRETARY  
Name            ALVAREZ, MICHAEL  
Address        C/O LYNX PROPERTY SERVICES, LLC  
                  12485 SW 137 AVENUE SUITE 309  
City-State-Zip: MIAMI FL 33186

Title            DIRECTOR  
Name            DUEY, JASON S.  
Address        C/O LYNX PROPERTY SERVICES, LLC  
                  12485 SW 137 AVENUE SUITE 309  
City-State-Zip: MIAMI FL 33186

*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:** DAVID ALONSO

**PRESIDENT**

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date