

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 APR 13 PM 2:30

**DOCUMENT # 725061 (6)**  
1. Corporation Name  
**PELICAN HARBOUR AND BEACH CLUB ASSOCIATION, INC.**

Principal Place of Business      Mailing Address  
**C/O CONDOMINIUM MGMT INC  
1801 GLENGARY ST  
SARASOTA FL 34231-0803**      **C/O CONDOMINIUM MGMT INC  
1801 GLENGARY ST  
SARASOTA FL 34231-0803**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified      3a. Date of Last Report  
**12/19/1972**      **04/22/1994**

4. FEI Number      Applied For  
**59-1541643**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution       **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status       **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address

21      26

Suite, Apt. #, etc.      Suite, Apt. #, etc.

22      27

City & State      City & State

23      28

Zip      Country      Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

**CONDOMINIUM MANAGEMENT, INC.  
1801 GLENGARY STREET  
SARASOTA FL 34231-3603**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City      85 Zip Code

**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE      Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reappointing)      DATE

12. OFFICERS AND DIRECTORS

TITLE      D  
NAME      FERGUSON, DAVID  
STREET ADDRESS      4234 GULF OF MEXICO DRIVE, AA-2  
CITY - ST - ZIP      LONGBOAT KEY FL

TITLE      PD  
NAME      KELLEY, WILLIAM  
STREET ADDRESS      4234 GULF OF MEXICO DRIVE BB-1  
CITY - ST - ZIP      LONGBOAT KEY FL

TITLE      VD  
NAME      BAGOT, ALFRED W.  
STREET ADDRESS      4234 GULF OF MEXICO DRIVE H-2  
CITY - ST - ZIP      LONGBOAT FL

TITLE      TD  
NAME      KENNY, TOM  
STREET ADDRESS      4234 GULF OF MEXICO DRIVE MH-5  
CITY - ST - ZIP      LONGBOAT KEY FL 34228

TITLE      D  
NAME      THOMAS, DAN  
STREET ADDRESS      4234 GULF OF MEXICO DR C-1  
CITY - ST - ZIP      LONGBOAT KEY FL

TITLE      AS  
NAME      CLARK, P R  
STREET ADDRESS      1801 GLENGARY ST  
CITY - ST - ZIP      SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE       Change       Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE       Change       Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

**SEE ATTACHED**

31 TITLE       Change       Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE       Change       Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE       Change       Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE       Change       Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 my corporation or the receiver or liquidator empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *P. Richard Clark*      4/7/95      813/921-5393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Telephone #

**P. Richard Clark**

**PHB****Pelican Harbour and Beach Club, Inc.**

725061

**Manager TAG****Local Address**

P/D	Col. Alfred W. Bagot 4234 Gulf of Mexico Drive H-2 Longboat Key, FL 34228
V/D	William Kelley 4234 Gulf of Mexico Drive BB-1 Longboat Key, FL 34228
S/D	Mrs. Virginia McArdle 4234 Gulf of Mexico Drive V-1 Longboat Key, FL 34228
T/D	Tom Kenny 4234 Gulf of Mexico Dr. ✓ #U2 Longboat Key, FL 34228
D	Mr. Ed Rubinow 4239 Gulf of Mexico Drive #2 Longboat Key, FL 34228
D	Dan Thomas ✓ 4234 Gulf of Mexico Drive #C-1 Longboat Key, FL 34228
D	Mrs. Joan Sapstein 4234 Gulf of Mexico Drive O-2 Longboat Key, FL 34228
D	LaVonne Moody 4234 Gulf of Mexico Drive D-1 Longboat Key, FL 34228
D	Mr. Paul Allen 4234 Gulf of Mexico Drive N-1 Longboat Key, FL 34228
A/S	P. Richard Clark ✓ 1801 Glengary Street Sarasota, FL