

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726663

FILED
Mar 11, 2008
Secretary of State

Entity Name: PELICAN POINT, UNIT 1, INC.

Current Principal Place of Business:

300 PARK SHORE DRIVE
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

300 PARK SHORE DR.
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-1546121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALK, STEVEN M ESQ.
% ROETZEL & ANDRESS, A LEGAL PROFESSIONAL
850 PARK SHORE DRIVE, 3RD FLOOR
NAPLES, FL 34103 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: CLAYTON, ANN
Address: 300 PARK SHORE DR.
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: DYCKMAN, TOM
Address: 300 PARK SHORE DR
City-St-Zip: NAPLES, FL 34103

Title: VDP () Delete
Name: MACARTHUR, SANDRA
Address: 300 PARK SHORE DRIVE
City-St-Zip: NAPLES, FL 34103

Title: VPD () Delete
Name: GREGORY, CANDACE
Address: 300 PARK SHORE DR
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: JONES, ROBERT H
Address: 300 PARK SHORE DRIVE
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: DYCKMAN, TOM
Address: 300 PARK SHORE DR
City-St-Zip: NAPLES, FL 34103

Title: TD (X) Change () Addition
Name: MACARTHUR, SANDRA
Address: 300 PARK SHORE DRIVE
City-St-Zip: NAPLES, FL 34103

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

Title: SD (X) Change () Addition
Name: GREELISH, SUZANNE
Address: 300 PARK SHORE DRIVE
City-St-Zip: NAPLES, FL 34103

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: ANN CLAYTON

PD

03/11/2008

Electronic Signature of Signing Officer or Director

Date