2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State
04-27-2007 90205 043 ****61.25

DOCUMENT # 743476

1. Entity Name
PELICANS COVE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
506 N GULF BLVD #504 INDIAN ROCKS BEACH, FL 34635	506 N GULF BLVD #504 INDIAN ROCKS BEACH, FL 34635

04202007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
506 N. GULF BLVD	506 N. GULF BLVD
Suite, Apt. #, etc. # 403	Suite, Apt. #, etc. # 403
City & State INDIAN ROCKS BEACH	City & State INDIAN ROCKS BEACH
Zip 33785 Country USA	Zip 33785 Country USA

4. FEI Number 59-1925120 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COMMUNITY MGMT CONCEPTS 4175 EAST BAY DR STE 205 CLEARWATER, FL 33764	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DELANEY, JIM 506 N GULF BLVD #403 INDIAN ROCKS BEACH, FL 33785	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BEAUREGARD, KEITH A 2001 HOWARD ST WHEATON, IL 60187	☐ Delete	STD	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD ~~BRAASCH, MICHELLE~~ ~~5407 S NOTTINGHAM~~ ~~CHICAGO, IL 60638~~	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VPD WILLIAM NESMITH 506 N. GULF BLVD # 502 INDIAN ROCKS BEACH, FL 33785	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] KEITH A. BEAUREGARD 04/29/07 6307902790
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #