


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2006 8:00 am
Secretary of State

05-31-2006 90009 008 ****61.25

DOCUMENT # 748542

1. Entity Name
PINK SHELL BEACH CLUB I CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**326 ESTERO BLVD.
 FORT MYERS BEACH, FL 33931**

Mailing Address
**PO BOX 540669
 MERRITT ISLAND, FL 32954 US**

50020043



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

05242006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-2057005

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**TAKACS, JOE
 271 CROCKETT BLVD
 MERRITT ISLAND, FL 32953**

7. Name and Address of New Registered Agent

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

**Filing Fee is \$61.25
 Due by September 6, 2006**

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 **P** Delete
 NAME **DELAHANTY, HOWARD**
 STREET ADDRESS **326 ESTERO BLVD**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE **D** Change Addition
 NAME **Thomas, Bowman**
 STREET ADDRESS **326 Estero Blvd**
 CITY-ST-ZIP **Fort Myers Beach FL 33931**

TITLE **STD** Delete
 NAME **PARKER, LLOYD**
 STREET ADDRESS **326 ESTERO BLVD**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **ALLEN, PATRICIA**
 STREET ADDRESS **326 ESTERO BLVD**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **IVERS, JERRI**
 STREET ADDRESS **326 ESTERO BLVD**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP


TITLE **VP** Delete
 NAME **YOUNG, MARY**
 STREET ADDRESS **326 ESTERO BLVD**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **DEQUATTRO, RICHARD**
 STREET ADDRESS **326 ESTRO BLVD.**
 CITY-ST-ZIP **FORT MYERS BEACH, FL 33931**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:  **5-23-06** **239-463-2882**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #