

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90035 020 \*\*\*\*61.25

**DOCUMENT # 750193**

1. Entity Name  
**PELICAN BAY HOMEOWNERS ASSOCIATION OF  
DAYTONA BEACH, INC.**



Principal Place of Business  
101 SEAHAWK DR.  
DAYTONA BEACH, FL 32119

Mailing Address  
101 SEAHAWK DR.  
DAYTONA BEACH, FL 32119

**50009884**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03282006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
59-1978960

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

HOEHN, FRANKLIN G  
101 SEAHAWK DR.  
DAYTONA BEACH, FL 32119-1959

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 May 1, 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 D ☒ Delete  
NAME MCCORMICK, LYLE B JR  
STREET ADDRESS 912 PELICAN BAY DR  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE Director ☐ Change ☒ Addition  
NAME NEMECEK, ROBERT  
STREET ADDRESS 580 PELICAN BAY DRIVE  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE P ☐ Delete  
NAME RILEY, LARRY  
STREET ADDRESS 101-5 BOB WHITE CT  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME THOMAS, MURPH  
STREET ADDRESS 233 MALLARD LANE  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME GUENTHER, JOAN  
STREET ADDRESS 56 CORMORANT CIRCLE  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME HOEHN, FRANKLIN G  
STREET ADDRESS 113 SHEARWATER WAY  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME FLORIO, LISA  
STREET ADDRESS 113-D WOOD SDOCK CIR.  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME JAMES SUTCH  
STREET ADDRESS 128 BLACK CROW CIRCLE  
CITY-ST-ZIP DAYTONA BEACH, FL 32119

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry Riley Pres.

Date

Daytime Phone #

4/4/06 386-322-0110