

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 27, 2002 8:00 am**  
**Secretary of State**

02-27-2002 90067 026 \*\*\*\*61.25

0037101

**DOCUMENT # 752554**

1. Entity Name

**PELICAN BAY APTS., INC.**

Principal Place of Business

Mailing Address

GERALD A. CURYLE  
 300 CROTON AVE. APT. 402  
 LANTANA FL 33462  
 USA

PELICAN BAY APTS INC.  
 300 CROTON AVENUE  
 LANTANA FL 33462  
 US

820410



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

PELICAN BAY APTS INC.

300 CROTON AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CROTON APT 202

APT 202

City & State

City & State

LANTANA, FL.

LANTANA, FL.

4. FEI Number

59-2150558

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

Country

Zip

Country

33462

PB

33462

PB

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LARSEN, JOHN  
 300 CROTON AVE.  
 202  
 LANTANA FL 33462

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/21/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input type="checkbox"/> Delete
NAME	LARSEN, JOHN	
STREET ADDRESS	300 CROTON AVE APT 202	
CITY-ST-ZIP	LANTANA FL 33462	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LAVIS, CHRIS	
STREET ADDRESS	300 CROTON AVE	
CITY-ST-ZIP	LANTANA FL 33462	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	CURYLE, GERALD	
STREET ADDRESS	300 CROTON #402	
CITY-ST-ZIP	LANTANA FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CURYLE, GERALD	
STREET ADDRESS	300 CROTON AVE. #402	
CITY-ST-ZIP	LANTANA, FL.	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAVIS Edward	
STREET ADDRESS	300 CROTON AVE	
CITY-ST-ZIP	LANTANA, FL 33462	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Edward P. Lavis

2-14-02

561-5825842

CR2E037 (9/01)