


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90078 015 ****61.25

DOCUMENT # 756012	
1. Entity Name PELICAN POINT PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business 4420 PELICAN PT DRIVE PUNTA GORDA FL 33950 US	Mailing Address P. O. BOX 510793 PUNTA GORDA FL 33950 US
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50018436



1st MOORE CR2E037 (10/04)

2. Principal Place of Business 4420 PELICAN PT. DRIVE	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State PUNTA GORDA, FL.	City & State
Zip 33950	Country CHARLOTTE

4. FEI Number 59-2192624	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JONASZ, LOUIS 4420 PELICAN POINTE DRIVE PUNTA GORDA FL 33950	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 <i>Louis H. Jonasz</i>	DATE 2-18-05
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FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME JONASZ, LOUIS STREET ADDRESS 4420 PELICAN POINTE DR CITY-ST-ZIP PUNTA GORDA FL 33950	<input type="checkbox"/> Delete	TITLE PD NAME JONASZ, LOUIS STREET ADDRESS 4420 PELICAN PT. DRIVE CITY-ST-ZIP PUNTA GORDA, FL 33950	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME MERCIER, GERTRUDE STREET ADDRESS 4521 PELICAN POINTE DRIVE CITY-ST-ZIP PUNTA GORDA FL 33950	<input type="checkbox"/> Delete	TITLE VP NAME GERTRUDE MERCIER STREET ADDRESS 4521 PELICAN PT. DRIVE CITY-ST-ZIP PUNTA GORDA, FL. 33950	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME BREZINKA, CAROL STREET ADDRESS 4440 PELICAN POINTE DRIVE CITY-ST-ZIP PUNTA GORDA FL 33950	<input type="checkbox"/> Delete	TITLE SD NAME VALERIE BREWSTER STREET ADDRESS 4510 PELICAN PT. DRIVE CITY-ST-ZIP PUNTA GORDA, FL. 33950	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME SERRENTINO, JEAN STREET ADDRESS 4431 PELICAN POINTE DRIVE CITY-ST-ZIP PUNTA GORDA FL 33950	<input type="checkbox"/> Delete	TITLE TD NAME JEAN SERRENTINO STREET ADDRESS 4431 PELICAN PT DRIVE CITY-ST-ZIP PUNTA GORDA, FL 33950	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME DIVIS, ZVONKO STREET ADDRESS 4301 PELICAN POINTE DR CITY-ST-ZIP PUNTA GORDA FL 33950	<input type="checkbox"/> Delete	TITLE D NAME ZVONKO DIVIS STREET ADDRESS 4301 PELICAN PT. DRIVE CITY-ST-ZIP PUNTA GORDA, FL 33950	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <i>Jean Serrentino</i>	JEAN SERRENTINO	2-18-05	(941) 639-1205
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