

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756012

FILED  
Feb 27, 2010  
Secretary of State

**Entity Name:** PELICAN POINT PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4521 PELICAN PT DRIVE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 510793  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

**FEI Number:** 59-2192624

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MERCIER, GERTRUDE  
4521 PELICAN POINTE DRIVE  
PUNTA GORDA, FL 33950 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MERCIER, GERTRUDE  
Address: 4521 PELICAN POINTE DR  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP  
Name: JONASZ, LOUIS  
Address: 4420 PELICAN POINTE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD  
Name: BREWSTER, VALERIE  
Address: 4510 PELICAN PT DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: T  
Name: BREWSTER, ROBERT  
Address: 4510 PELICAN POINTE DR  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D  
Name: HATHAWAY, PATRICIA  
Address: 4415 PELICAN POINTE DR  
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** GERTRUDE MERCIER

PD

02/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date