2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760018

FILED Jun 09, 2009 Secretary of State

Entity Name: PELICAN POINTE ON THE GULF ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 26130 HICKORY BLVD SUITE 55 BONITA SPRINGS, FL 33923 US **New Mailing Address: Current Mailing Address:** C/O SMITH & CO., LLP PO BOX 2507 BONITA SPRINGS, FL 34133 US FEI Number: 59-2654562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KLEIN, KYLE HENDERSON, WILLIAM 27657 OLD US 41 12450 VILLAGIO WAY BONITA SPRINGS, FL 34133 FORT MYERS, FL 33912 US US 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: WILLIAM HENDERSON 06/09/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BOARDMAN, BRUCE BOARDMAN, BRUCE Name: Name: 26130 HICKORY BLVD #55 Address: 26130 HICKORY BLVD #55 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: () Change () Addition RICHARD WESTFORT Name: Name: Address: 26130 HICKORY BLVD #3S Address: City-St-Zip: BONITA SPRINGS, FL City-St-Zip: Title: PD () Delete Title: (X) Change () Addition WACHTER, BOB Name: WACHTER, BOB Name: 26130 HICKORY BLVD #5 N Address: Address: 26130 HICKORY BLVD #5 N City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: () Change () Addition HENDERSON, BILL Name: Name: 26130 HICKORY BLVD #1N Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: Title: () Delete () Change () Addition GLOYECK, WILLIAM Name: Name: W 297 N 807 KINGS WY Address: Address: City-St-Zip: WAUKESHA, WI 53188 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BRUCE BOARDMAN P 06/09/2009