

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760018

FILED
Feb 07, 2012
Secretary of State

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

Current Principal Place of Business:

26130 HICKORY BLVD
SUITE 55
BONITA SPRINGS, FL 33923 US

New Principal Place of Business:

Current Mailing Address:

C/O SMITH & CO., LLP
PO BOX 2507
BONITA SPRINGS, FL 34133 US

New Mailing Address:

FEI Number: 59-2654562 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENDERSON, WILLIAM
12450 VILLAGIO WAY
FORT MYERS, FL 33912 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: P
Name: BOARDMAN, BRUCE
Address: 26130 HICKORY BLVD #55
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD
Name: RICHARD WESTFORT
Address: 26130 HICKORY BLVD #3S
City-St-Zip: BONITA SPRINGS, FL

Title: T
Name: WACHTER, BOB
Address: 26130 HICKORY BLVD #5 N
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S
Name: HENDERSON, BILL
Address: 26130 HICKORY BLVD #1N
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D
Name: GLOYECK, WILLIAM
Address: W 297 N 807 KINGS WY
City-St-Zip: WAUKESHA, WI 53188

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: BOB WACHTER

T

02/07/2012

Electronic Signature of Signing Officer or Director

Date