2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767625

FILED Apr 04, 2006 Secretary of State

Entity Name: PELICAN BAY YACHT CLUB CONDOMINIUM, BUILDING B, INC.

Current Principal Place of Business: New Principal Place of Business: 7300 PARK ST SEMINOLE, FL 33777 US **Current Mailing Address: New Mailing Address:** % RESOURCE PROP MGMT 7300 PARK ST SEMINOLE, FL 33777 US FEI Number: 59-0475190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ENGLERT, NORM TESSLER, LEIGH B % RESOURCE PROPERTY MGMT % RESOURCE PROPERTY MGMT 5901 SUN BLVD, STE 200 5901 SUN BLVD, STE 200 SAINT PETERSBURG, FL 33715 US SAINT PETERSBURG, FL 33715 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: LEIGH B TESSLER 04/04/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition AVERY, BILL AVERY, BILL Name: Name: 5940 PELICAN BAY PLAZA, #705 Address: 5940 PELICAN BAY PLAZA, #705 Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: GULFPORT, FL 33707 Title: (X) Delete Title: () Change () Addition BEERY, JACK Name: Name: Address: 5940 PELICAN BAY PLAZA, #502 Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: Title: () Change () Addition () Delete PHILIPS, JIM Name: Name: 5940 PELICAN BAY PLAZA, #501 Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: ROTH, LENNY Name: 5940 PELICAN BAY PLAZA #505 Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SUSAN SAMLASKA S 04/04/2006

SAMLESKA, SUSAN

GULFPORT, FL 33707

5940 PELICAN BAY PLAZA, #301

Name:

Address:

City-St-Zip: