

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767625

FILED
Apr 06, 2009
Secretary of State

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

Current Principal Place of Business:

5901 SUN BLVD
200
ST. PETERSBURG, FL 33715 US

New Principal Place of Business:

5940 PELICAN BAY PLAZA
GULFPORT, FL 33707 US

Current Mailing Address:

5901 SUN BLVD
200
ST. PETERSBURG, FL 33715 US

New Mailing Address:

5901 SUN BLVD
SUITE 200
ST. PETERSBURG, FL 33715 US

FEI Number: 59-0475190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
5901 SUN BLVD
STE 200
SAINT PETERSBURG, FL 33715 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: VP () Delete
Name: HAHN, JOHN
Address: 5940 PELICAN BAY PLAZA, #PHF
City-St-Zip: GULFPORT, FL 33707

Title: P () Delete
Name: REGAN, TOM
Address: 5940 PELICAN BAY PLAZA, #706
City-St-Zip: GULFPORT, FL 33707

Title: T (X) Delete
Name: ABRAMS, GLORIA
Address: 5940 PELICAN BAY PLAZA, #605
City-St-Zip: GULFPORT, FL 33707

Title: S () Delete
Name: BARATELLI, PIERRE
Address: 5940 PELICAN BAY PLAZA, #1104
City-St-Zip: GULFPORT, FL 33707

Title: D () Delete
Name: KUPP, KAREN
Address: 5940 PELICAN BAY PLAZA #304
City-St-Zip: GULFPORT, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LORIMER, REGINIA
Address: 5940 PELICAN BAY PLAZA, #501
City-St-Zip: GULFPORT, FL 33707

Title: P/T (X) Change () Addition
Name: REGAN, TOM
Address: 5940 PELICAN BAY PLAZA, #706
City-St-Zip: GULFPORT, FL 33707

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PETER DILTS, CMCA

MGR

04/06/2009

Electronic Signature of Signing Officer or Director

Date