

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90007 012 ****61.25

DOCUMENT # 769563

1. Entity Name

PELICAN WALK OWNERS ASSOCIATION, INC.

Principal Place of Business

6905 THOMAS DR
 PANAMA CITY BCH. FL 32408-6164

Mailing Address

6905 THOMAS DR
 PANAMA CITY BCH. FL 32408-6158

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2294360

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HICKEY, EDWARD F. J
 8224 W. HWY 98-A
 PANAMA CITY FL 32407

Name

Jack Franzen

Street

4708 Baywood Drive

City

Lynn Haven

FL

Zip Code

32444

8. 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

Jack Franzen, Director

(NOTE: Registered Agent signature required when reinstating)

DATE

5-13-00

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **VPD**
 STREET ADDRESS **GLOVER, BRIAN**
 CITY-ST-ZIP **2910 FOOTHILL TR**
MARIETTA GA 30066

TITLE ☒ Change ☐ Addition
 NAME **Brian Glover**
 STREET ADDRESS **2910 Foothill Trail**
 CITY-ST-ZIP **Marietta, GA 30066**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **BRYAN, JEANNIE**
 CITY-ST-ZIP **602 CORANADA DR SW**
DECATUR AL 35801

TITLE ☐ Change ☒ Addition
 NAME **STD**
 STREET ADDRESS **Michelle Voelkl**
 CITY-ST-ZIP **6905 Thomas Drive #607**
Panama City Beach, FL 32408

TITLE ☒ Delete
 NAME **DST**
 STREET ADDRESS **HICKEY, EDWARD F**
 CITY-ST-ZIP **8224 BACK BEACH RD**
PANAMA CITY FL

TITLE ☐ Change ☒ Addition
 NAME **PD**
 STREET ADDRESS **John Tehan**
 CITY-ST-ZIP **3601 Pitchin Road**
Springfield, OH 45502

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **COLLINS, A J**
 CITY-ST-ZIP **1818 SLADE DR**
COLUMBUS GA 31901

TITLE ☐ Change ☒ Addition
 NAME **VPD**
 STREET ADDRESS **John Farr**
 CITY-ST-ZIP **1020 Brookhollow Rd**
Anderson, SC 29621

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **GIBSON, BILL**
 CITY-ST-ZIP **516 ASHLEY WAY**
PEACHTREE CITY GA 30269

TITLE ☒ Change ☐ Addition
 NAME **Bill Gibson**
 STREET ADDRESS **516 Ashley Way**
 CITY-ST-ZIP **Peachtree City, GA 30269**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **P**
 STREET ADDRESS **Jack Franzen**
 CITY-ST-ZIP **4708 Baywood Drive**
Lynn Haven, FL 32444

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

Jack Franzen

5-13-00 850-271 1267

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

Attachment
DH 769563
DW 58539

Additional Directors:

Chris McDonald
6905 Thomas Drive #412
Panama City Beach, FL 32408