2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 769563

1. Entity Name
PELICAN WALK OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6905 THOMAS DR PANAMA CITY BCH., FL 32408-6164	6905 THOMAS DR PANAMA CITY BCH., FL 32408-6164

DO NOT WRITE IN THIS SPACE

01302007 No Chg-NP CR2E037 (4/06)

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

HESS, BRIAN D
9108 FRONT BEACH RD
PANAMA CITY BEACH, FL 32407

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	WEIMER, ALAN
STREET ADDRESS	59 SEMINOLE TR. S.W.
CITY-ST-ZIP	CARTERSVILLE, GA 30120
TITLE	TRES
NAME	HICKEY, EDWARD
STREET ADDRESS	6905 THOMAS D
CITY-ST-ZIP	PANAMA CITY, FL 32408
TITLE	P
NAME	GRANT, JAMES
STREET ADDRESS	107 AZALEA TERRACE
CITY-ST-ZIP	DOTHAN, AL 36303
TITLE	D
NAME	BOLTON, RALPH
STREET ADDRESS	P O BOX 375
CITY-ST-ZIP	PICKWICK DAM, TN 38365
TITLE	D
NAME	EDWARDS, WARD
STREET ADDRESS	PO BOX 2160
CITY-ST-ZIP	BUTLER, GA 310062160
TITLE	D
NAME	ROGERS, RON
STREET ADDRESS	8999 EDGEWATER LN
CITY-ST-ZIP	JONESBORO, GA 30236

U00000619029
02/08/07-80055-004 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Truman J. Bill II JAN 30, 2007 850 233-0076
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #