

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769563

FILED
Apr 07, 2009
Secretary of State

Entity Name: PELICAN WALK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6905 THOMAS DR
PANAMA CITY BCH., FL 324086164

New Principal Place of Business:

Current Mailing Address:

6905 THOMAS DR
PANAMA CITY BCH., FL 324086164

New Mailing Address:

FEI Number: 59-2294360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J
427 MCKENZIE AVENUE
PANAMA CITY, FL 32401 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: S () Delete
Name: OAN, DANIEL
Address: 2700 TWIN LAKE DR.
City-St-Zip: BAINBRIDGE, GA 39819

Title: TRES () Delete
Name: HICKEY, EDWARD
Address: 6905 THOMAS D
City-St-Zip: PANAMA CITY, FL 32408

Title: P () Delete
Name: GRANT, JAMES
Address: 107 AZALEA TERRACE
City-St-Zip: DOTHAN, AL 36303 US

Title: D () Delete
Name: BOLTON, RALPH
Address: P O BOX 375
City-St-Zip: PICKWICK DAM, TN 38365

Title: D () Delete
Name: EDWARDS, WARD
Address: PO BOX 2160
City-St-Zip: BUTLER, GA 310062160

Title: D () Delete
Name: ROGERS, RON
Address: 8999 EDGEWATER LN
City-St-Zip: JONESBORO, GA 30236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: HATCHER, KENNETH
Address: 1136 GREENSWARD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 92

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

Title: P (X) Change () Addition
Name: GRANT, JAMES
Address: 1254 WESTGATE PARKWAY
City-St-Zip: DOTHAN, AL 36303 US

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: THOMAS J. RISALVATO II

MGR

04/07/2009

Electronic Signature of Signing Officer or Director

Date