

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771213

FILED
Apr 27, 2007
Secretary of State

Entity Name: PELICAN POINTE UMBRELLA ASSOCIATION, INC.

Current Principal Place of Business:

5885 MARINA DR.
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

2001 9TH AVENUE
308
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-0021349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, WILLIAM F
KEYSTONE PROPERTY MANAGEMENT GROUP INC
2001 9TH AVENUE, SUITE #308
VERO BEACH, FL 32960 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: PD () Delete
Name: BUTTERS, CHARLES
Address: 5745-3 MARINA DR
City-St-Zip: SEBASTIAN, FL 32958 US

Title: VPD () Delete
Name: MORGAN, ELLIE
Address: 9628-2 RIVERSIDE DRIVE
City-St-Zip: SEBASTIAN, FL 32958 US

Title: SD () Delete
Name: MASTERON, JAMES
Address: 9650 ESTUARY WAY
City-St-Zip: SEBASTIAN, FL 32958 US

Title: TD () Delete
Name: LACASCIA, FRANK
Address: 5725 MARINA DRIVE DR
City-St-Zip: SEBASTIAN, FL 32958 US

Title: D () Delete
Name: LAROSE, LOUIS
Address: 5745 PELICAN POINTE DRIVE
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORITZ, LARRY
Address: 9680 ESTUARY WAY #4
City-St-Zip: SEBASTIAN, FL 32958 US

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

Title: TD (X) Change () Addition
Name: MASTERAN, JAMES
Address: 9650 ESTUARY WAY #2
City-St-Zip: SEBASTIAN, FL 32958 US

Title: SD (X) Change () Addition
Name: GICOLA, PAUL
Address: 5725 MARINA DRIVE DR
City-St-Zip: SEBASTIAN, FL 32958 US

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: JAMES MASTERAN

TD

04/27/2007

Electronic Signature of Signing Officer or Director

Date