2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# H50251

Entity Name: PELICAN OF ST. JOHNS COUNTY, INC.

Current Principal Place of Business:

308 S. PONCE DE LEON BLVD.
ST. AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

308 S. PONCE DE LEON BLVD.
ST. AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 59-2523292 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EATON JR, ROSWELL W
308 S. PONCE DE LEON BLVD
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

EATON, ROSWELL W
308 S. PONCE DE LEON BLVD
SAINT AUGUSTINE, FL 32084 US

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: ROSWELL W. EATON 03/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DT ( ) Delete
Name: EATON-BURKLEY, PATRICIA
Address: 308 S. PONCE DE LEON BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: DP ( ) Delete
Name: EATON, ROSWELL W
Address: 308 S. PONCE DE LEON BLVD.
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: EATON BURKLEY, PATRICIA
Address: 308 S. PONCE DE LEON BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSWELL W. EATON DP 03/30/2009
Electronic Signature of Signing Officer or Director Date