

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K59429** (6)
1. Corporation Name
PELICAN HOMES, INC.

Principal Place of Business 1300 ENTERPRISE DRIVE UNIT C PORT CHARLOTTE FL 33953	Mailing Address 1300 ENTERPRISE DRIVE UNIT C PORT CHARLOTTE FL 33953
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 110 Sportsman Rd. Suite, Apt. #, etc. 22 City & State Rotonda, West, FL Zip 24 33947 25 US		2a. Mailing Address 26 110 Sportsman Rd. Suite, Apt. #, etc. 27 City & State Rotonda, West, FL Zip 29 33947 30 US		3. Date Incorporated or Qualified 01/19/1989
		4. FEI Number 59-3055896		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent ANDERSON, RUDY M 3502 ACCESS RD ENGLEWOOD FL 34224		10. Name and Address of New Registered Agent 81 Name Rudy M. Anderson 82 Street Address (P.O. Box Number is Not Acceptable) 110 Sportsman Rd. 83 84 City Rotonda, West FL 85 Zip Code 33947	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  (NOT: Registered Agent signature required when reinstating) DATE **4-7-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIEROLF, ERNEST	1.2 NAME	
STREET ADDRESS	1300 ENTERPRISE DR., UNIT C	1.3 STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIEROLF, ERNEST	2.2 NAME	
STREET ADDRESS	1300 ENTERPRISE DR., UNIT C	2.3 STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE FL	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIEROLF, MARGARETHA	3.2 NAME	
STREET ADDRESS	1300 ENTERPRISE DR., UNIT C	3.3 STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **E. DIEROLF - PST**  **4-17-98** **1-941-4731448**

CF2E034 (10/97)