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FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90127 013 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K59429

1. Corporation Name
PELICAN HOMES, INC.

Principal Place of Business
110 SPORTSMAN ROAD
UNIT C
ROTONDA FL 33947
US

Mailing Address
110 SPORTSMAN ROAD
UNIT C
ROTONDA FL 33947
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/19/1989

4. FEI Number

59-3055896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 12734, SL PEMBERKE CR 26

Suite, Apt. #, etc.

22 City & State

23 LAKE SURY FL.

24 Zip

34266

Country

25 USA

2a. Mailing Address

27 12734, SL PEMBERKE CR

Suite, Apt. #, etc.

28 City & State

LAKE SURY FL.

Zip

34266

Country

29 FL

30

9. Name and Address of Current Registered Agent

ANDERSON, RUDY M
110 SPORTSMAN ROAD
ROTONDA FL 33947

10. Name and Address of New Registered Agent

81 Name

Ernst Dierolf

82 Street Address (P.O. Box Number is Not Acceptable)

12734 SL PEMBERKE CR

83

84 City

LAKE SURY

FL

85 Zip Code

34266

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 607.0504, Florida Statutes.

SIGNATURE Ernst Dierolf, Pres.

(NOTE: Registered Agent signature required when reinstating)

4-10-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE

NAME DIEROLF, ERNEST
STREET ADDRESS 1300 ENTERPRISE DR., UNIT C
CITY-STATE-ZIP PORT CHARLOTTE FL

TITLE D ☐ DELETE

NAME DIEROLF, ERNEST
STREET ADDRESS 1300 ENTERPRISE DR., UNIT C
CITY-STATE-ZIP PORT CHARLOTTE FL

TITLE V ☐ DELETE

NAME DIEROLF, MARGARETHA
STREET ADDRESS 1300 ENTERPRISE DR., UNIT C
CITY-STATE-ZIP PORT CHARLOTTE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 indicate 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, with all other like empowered.

SIGNATURE: Ernst Dierolf, Pres.

4-10-99

(941) 7434721

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0451272