FILED
May 02, 2005 08:00 AM
Secretary of State

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000023815

1. Entity Name
PELICAN POINT PROPERTIES, LLC

Principal Place of Business	Mailing Address
PELICAN POINT LLC 180 SW 3RD AVE BOYNTON BEACH, FL 33435 US	PELICAN POINT LLC 180 SW 3RD AVE BOYNTON BEACH, FL 33435 US

DO NOT WRITE IN THIS SPACE

04262005 No Chg-LLC CR2E083 (10/03)

4. FEI Number
42-1598721
Applied For / Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
BILLITIER, DAVID
2808 NE 25TH STREET
FORT LAUDERDALE, FL 33305

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

U000003S9532
05/04/05--90159--004 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BILLITIER, DAVID
STREET ADDRESS	2808 NE 25TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305
TITLE	MGRM
NAME	BILLITIER, RONALD J
STREET ADDRESS	2808 NE 25TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305
TITLE	MGRM
NAME	BILLITIER, RONALD D
STREET ADDRESS	2808 NE 25TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [signature] 4-29-05 561-734-2477
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #