

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M70023

(0)

1. Corporation Name

PELICAN LANDING PROPERTIES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 24 PM 3:50

Principal Place of Business

801 LAUREL OAK DR
STE 500
NAPLES FL 33963
US

Mailing Address

801 LAUREL OAK DR
STE 500
NAPLES FL 33963
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

02/29/1988

3a. Date of Last Report

03/17/1994

4. FEI Number

25-1629086

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.04?

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MCCLURE, ROBERT W.
801 LAUREL OAK DR
NAPLES FL 33963

10. Name and Address of New Registered Agent

81 Name

Vivien N. Hastings

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

801 Laurel Oak Drive

83 Suite

Suite 500

84 City

Naples

FL

85 Zip Code

33963

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

Vivien N. Hastings

Vivien N. Hastings

2/14/95

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SCHMOYER, JERRY H.
STREET ADDRESS 9200-101 BONITA BEACH RD.
CITY, ST, ZIP BONITA SPRINGS FL

TITLE S
NAME MCCLURE, ROBERT W
STREET ADDRESS 801 LAUREL OAK DR #500
CITY, ST, ZIP NAPLES FL

TITLE DCAS
NAME CARLSON, A. J.
STREET ADDRESS 801 LAUREL OAK DR #500
CITY, ST, ZIP NAPLES FL

TITLE DT
NAME BAKER, R W
STREET ADDRESS 801 LAUREL OAK DR, STE 500
CITY, ST, ZIP NAPLES FL

TITLE AS
NAME HASTINGS, V N
STREET ADDRESS 801 LAUREL OAK DR, STE 500
CITY, ST, ZIP NAPLES FL

TITLE VPB
NAME HOFFMAN, W
STREET ADDRESS 3900 LAKEMONTH DR.
CITY, ST, ZIP BONITA SPRINGS FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1.

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 24820 Burnt Pine Drive
1.4 CITY, ST, ZIP Bonita Springs, FL 33923

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME AS
2.3 STREET ADDRESS Blake, D.
2.4 CITY, ST, ZIP 24820 Burnt Pine Drive
Bonita Springs, FL 33923

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Faust, R. E.
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME S
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME VB
6.3 STREET ADDRESS Mitchell, J.
6.4 CITY, ST, ZIP 24820 Burnt Pine Drive
Bonita Springs, FL 33923

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.04(3)(b), 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 197, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Vivien N. Hastings
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Vivien N. Hastings, Secretary

2/14/95

(813) 597-6061