

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000993

FILED  
Jan 25, 2005  
Secretary of State

**Entity Name:** WEDGE WOOD II AT PELICAN STRAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NEWELL PROPERTY MGMT.  
5435 JAEGER RD #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NEWELL PROPERTY MGMT.  
5435 JAEGER RD #4  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 65-1006872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWELL, WILLIAM  
5435 JAEGER RD #4  
NAPLES, FL 34109 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HETTINGER, MICHAEL  
Address: 5936 SAND WEDGE LANE #1606  
City-St-Zip: NAPLES, FL 34110

Title: VD ( ) Delete  
Name: GAUCH, RON  
Address: 5928 SAND WEDGE LANE #1804  
City-St-Zip: NAPLES, FL 34110

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: PORTEUS, JOAN  
Address: 5923 SAND WEDGE LANE #1904  
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL HETTINGER

PD

01/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date