

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001192

FILED  
Mar 15, 2005  
Secretary of State

**Entity Name:** PELICAN PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

133 SOUTH HARBOR DRIVE  
VENICE, FL 34285

**New Principal Place of Business:**

3285 PLACIDA ROAD  
GROVE CITY, FL 34224

**Current Mailing Address:**

POST OFFICE BOX 1804  
VENICE, FL 34284

**New Mailing Address:**

6250 MCKINLEY TERRACE  
ENGLEWOOD, FL 34224

**FEI Number:** 65-1040528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEACOCK, JR, THOMAS J PRES  
POST OFFICE BOX 1804  
VENICE, FL 34284 US

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

MCVEY, LORRAINE PRES  
6250 MCKINLEY TERRACE  
ENGLEWOOD, FL 34224 US

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: LORRAINE MCVEY

03/15/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BLOODSWORTH, JOHN F  
Address: POST OFFICE BOX 7639  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Delete  
Name: BLOODSWORTH, BETTE J  
Address: POST OFFICE BOX 7639  
City-St-Zip: NORT PORT, FL 34287

Title: D (X) Delete  
Name: PEACOCK, THOMAS  
Address: 133 SOUTH HARBOR DRIVE  
City-St-Zip: VENICE, FL 34285

Title: D (X) Delete  
Name: PEACOCK, MARJORIE E  
Address: 133 SOUTH HARBOR DRIVE  
City-St-Zip: VENICE, FL 34285

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

Title: D (X) Change ( ) Addition  
Name: GILCHER, JEFFREY  
Address: 3285 PLACIDA ROAD  
City-St-Zip: GROVE CITY, FL 34224

Title: D (X) Change ( ) Addition  
Name: MCVEY, LORRAINE  
Address: 6250 MCKINLEY TERRACE  
City-St-Zip: ENGLEWOOD, FL 34224

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

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

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: LORRAINE MCVEY

PRES

03/15/2005

Electronic Signature of Signing Officer or Director

Date