

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001192

FILED
Jan 05, 2007
Secretary of State

Entity Name: PELICAN PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3285 PLACIDA ROAD
GROVE CITY, FL 34224

New Principal Place of Business:

Current Mailing Address:

6250 MCKINLEY TERRACE
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 65-1040528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCVEY, LORRAINE PRES
6250 MCKINLEY TERRACE
ENGLEWOOD, FL 34224 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: D () Delete
Name: GILCHER, JEFFREY
Address: 3285 PLACIDA ROAD
City-St-Zip: GROVE CITY, FL 34224

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

01/05/2007

Electronic Signature of Signing Officer or Director

Date