

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002680

FILED
Apr 20, 2007
Secretary of State

Entity Name: SOUTHERN HILLS AT PELICAN SOUND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SOUTHERN HILLS DRIVE
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9709
NAPLES, FL 34101

New Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMiami TRAIL E.
NAPLES, FL 34113

FEI Number: 65-1050505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARADISE PROPERTY MANAGEMENT
840 111TH AVE. N #9
NAPLES, FL 34108 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: DAWSON, WILLIAM
Address: 21800 SOUTHERN HILLS DRIVE #102
City-St-Zip: ESTERO, FL 33928

Title: VPD () Delete
Name: BELLEVILLE, MARY
Address: 1111 LYNAUGH ROAD
City-St-Zip: VICTOR, NY 14564

Title: TD () Delete
Name: RIGGIO, FRANK
Address: 21740 SOUTHERN HILLS DR #203
City-St-Zip: ESTERO, FL 33928

Title: SD () Delete
Name: REITZ, AL
Address: 21 W 601 MAPLE AVE.
City-St-Zip: MEDINAH, IL 60157

Title: D () Delete
Name: WHITTENDALE, DAVE
Address: 11 WADSWORTH PLACE
City-St-Zip: SMITHTOWN, NY 11787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: BELLEVILLE, MARY
Address: 1111 LYNAUGH ROAD
City-St-Zip: VICTOR, NY 14564

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

Title: D (X) Change () Addition
Name: BAKER, CHARLES
Address: 21820 SOUTHERN HILLS DR, UNIT #203
City-St-Zip: ESTERO, FL 33928

Title: VD (X) Change () Addition
Name: WHITTENDALE, DAVE
Address: 11 WADSWORTH PLACE
City-St-Zip: SMITHTOWN, NY 11787

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: WILLIAM DAWSON

PD

04/20/2007

Electronic Signature of Signing Officer or Director

Date