


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90426 002 ****61.25

DOCUMENT # N01000001605	
1. Entity Name OSPREY POINTE AT PELICAN MARSH CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 1719 TRADE CENTER WAY #4 NAPLES, FL 34109	Mailing Address PO BOX 8478 NAPLES, FL 34101
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P & M Property Management
15660 San Carlos Blvd. # 40
Fort Myers, Florida 33908

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04262006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-1085331	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WINKLER, NANCY 1719 TRADE CENTER WAY #4 NAPLES, FL 34109		Name <u>Paul Sapp</u> Street Address <u>610</u> City <u>P & M Property Management</u> <u>15660 San Carlos Blvd. # 40</u> <u>Fort Myers, Florida 33908</u> Code _____	

8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent.

SIGNATURE Paul Sapp (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KELLER, LAWRENCE 9017 WHIMBREL WATCH LANE NAPLES, FL 34109 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15660 SAN CARLOS BLVD #40 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HARRISON, ALAN 9046 WHIMBREL WATCH LN, # 101 NAPLES, FL 34109 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15660 SAN CARLOS BLVD #40 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LORD, JOHN 9013 WHIMBREL WATCH LANE NAPLES, FL 34109 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15660 SAN CARLOS BLVD #40 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HENSON, KEN 9017 WHIMBREL WATCH LANE NAPLES, FL 34109 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15660 SAN CARLOS BLVD #40 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORRESTAL, TOM 9066 WHIMBREL WATCH LN, # 201 NAPLES, FL 34109 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D. MAYER SCHWARTZ 9046 WHIMBREL WATCH LN #201 NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 15660 SAN CARLOS BLVD #40 FORT MYERS, FL 33908

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: K. H. Henson Jr. (Treasurer) 4/27/06 (239) 591-1422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #