

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001605

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** OSPREY POINTE AT PELICAN MARSH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

INTEGRATED PROPERTY MGMT.  
3435 10TH STREET NORTH, SUITE #201  
NAPLES, FL 34103

**New Principal Place of Business:**

INTEGRATED PROPERTY MGMT.  
5020 TAMiami TR NORTH, STE 206  
NAPLES, FL 34103

**Current Mailing Address:**

INTEGRATED PROPERTY MGMT.  
3435 10TH STREET NORTH, SUITE #201  
NAPLES, FL 34103

**New Mailing Address:**

INTEGRATED PROPERTY MGMT.  
5020 TAMiami TR NORTH, STE 206  
NAPLES, FL 34103

FEI Number: 65-1085331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INTEGRATED PROPERTY MANAGEMENT  
3435 10TH STREET NORTH  
SUITE #201  
NAPLES, FL 34103 US

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

INTEGRATED PROPERTY MANAGEMENT  
5020 TAMiami TR NORTH  
SUITE #206  
NAPLES, FL 34103 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:

04/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HARRISON, RALPH  
Address: 9024 WHIMBREL WATCH LANE, #21-201  
City-St-Zip: NAPLES, FL 34109

Title: DT  
Name: HARRISON, ALAN  
Address: 9045 WHIMBREL WATCH LANE #101  
City-St-Zip: NAPLES, FL 34109

Title: DVP  
Name: HENSON, KEN  
Address: 9017 WHIMBREL WATCH LANE #4-201  
City-St-Zip: NAPLES, FL 34109

Title: DS  
Name: GOLIA, CLEMENTE  
Address: 9037 WHIMBREL WATCH LANE #9-201  
City-St-Zip: NAPLES, FL 34109

Title: D  
Name: FORRESTAL, TOM  
Address: 9066 WHIMBREL WATCH LANE #18201  
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: RALPH HARRISON

DP

04/06/2010

Electronic Signature of Signing Officer or Director

Date