

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2008 8:00 am
Secretary of State

04-02-2008 90022 011 ****61.25

DOCUMENT # N02720

1. Entity Name
**PELICAN REEF WEST CONDOMINIUM ASSOCIATION,
INC.**



Principal Place of Business
**1638 SOUTH BAYSHORE COURT
COCONUT GROVE, FL 33133**

Mailing Address
**C/O BERENFELD-SPRITZER
2525 PONCE DE LEON BLVD 5TH FL
MIAMI, FL 33134**



03272008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-2428797

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GOODMAN-GUENTHER, JOYCE ESQ.
10723 SW 104 ST.
MIAMI, FL 33186**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FALCO, THOMAS 1638 S. BAYSHORE CT #402 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KENDALL, HAROLD E 1638 S. BAYSHORE CT. #501 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ALLEGUEZ, ALDO F 1638 S. BAYSHORE COURT #101 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BASSUK, BOBBIE 1638 S. BAYSHORE COURT #101 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #