## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003105

FILED Jan 18, 2006 Secretary of State

Entity Name: PELICAN AT DESTIN WEST BEACH AND BAY RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1515 MIRACLE STRIP PARKWAY SE 1322 MIRACLE STRIP PARKWAY SE FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

1515 MIRACLE STRIP PARKWAY SE FORT WALTON BEACH, FL 32548

1324 MIRACLE STRIP PARKWAY SE SUITE L-08 FORT WALTON BEACH, FL 32548

FEI Number: 20-1581097 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NAPLES-LAWDOCK, INC.

1395 PANTHER LANE

SUITE 300

PEVEY, NORMA J

318 F BREAM AVE

FT. WALTON BEACH,

SUITE 300 FT. WALTON BEACH, FL 32548 US NAPLES, FL 34109 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: NORMA JEAN PEVEY 01/18/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ()Delete Title: DP (X)Change ()Addition

Name: TOLBERT, FRED E III Name: BRATTON, LIZBETH Address: 1500 MIRACLE STRIP PARKWAY SE Address: 288 KIDD STREET NE

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VD ( ) Delete Title: DV (X) Change ( ) Addition Name: WILLIAM G.P. KREUSER, Name: KRAFT, STEVE

Address: 1500 MIRACLE STRIP PARKWAY SE Address: 38 LITHIA

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: DADEVILLE, AL 36853

Title: ( ) Delete Title: DS ( ) Change (X) Addition

 Name:
 Name:
 TOLBERT, FRED E III

 Address:
 Address:
 1500 MIRACLE STRIP PARKWAY

 City-St-Zip:
 City-St-Zip:
 FT, WALTON BEACH, FL 32548

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: NORMA JEAN PEVEY RA 01/18/2006