

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011141

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** AVIANO AT PELICAN PRESERVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6719 WINKLER RD.  
SUITE 200  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

6719 WINKLER RD.  
SUITE 200  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 42-1654552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLIANT PROPERTY MANAGEMENT, LLC  
6719 WINKLER RD.  
SUITE 200  
FORT MYERS, FL 33919 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  
Name: MEZEY, PHILIP  
Address: 9220 AVIANO DR. #202  
City-St-Zip: FORT MYERS, FL 33913

Title: TD  
Name: HAILE, NED  
Address: 9356 AVIANO DR. #201  
City-St-Zip: FORT MYERS, FL 33913

Title: VPD  
Name: DILORENZO, ANTHONY  
Address: 9282 AVIANO DR #201  
City-St-Zip: FORT MYERS, FL 33913

Title: S  
Name: DORISIO, BARBARA  
Address: 9374 AVIANO DR #201  
City-St-Zip: FORT MYERS, FL 33913

Title: D  
Name: PRICE, JAMES  
Address: 9390 AVIANO DR #201  
City-St-Zip: FORT MYERS, FL 33913

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: NED HAILE

TD

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date