

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000532

FILED
Mar 10, 2009
Secretary of State

Entity Name: TRIESTE AT PELICAN PRESERVE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 01-0827564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLES, ROBERT E
C/O SCHOO MANAGEMENT, INC.
9411 CYPRESS LAKE DR., STE 2
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: D () Delete
Name: BRODSKY, HARVEY
Address: 10615 TIRANO COURT
City-St-Zip: FT MYERS, FL 33913

Title: VP () Delete
Name: LESTER, CHRIS
Address: 10618 TIRANO COURT
City-St-Zip: FORT MYERS, FL 33913

Title: SD () Delete
Name: KESSLER, ROBIN
Address: 9360 TRIESTE DRIVE
City-St-Zip: FT MYERS, FL 33913

Title: D () Delete
Name: IRADI, SALVATORE
Address: 8 HAZELTINE LANE
City-St-Zip: FT MYERS, FL 33913

Title: SVP () Delete
Name: CASTOR, SUSAN
Address: 9366 TRIESTE DRIVE
City-St-Zip: FORT MYERS, FL 33913

Title: PD () Delete
Name: PEDERSON, ANDY
Address: 9363 TRIESTE DR
City-St-Zip: FT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEDERSON, ANDY
Address: 9363 TRIESTE DRIVE
City-St-Zip: FORT MYERS, FL 33913

Title: 2VP (X) Change () Addition
Name: LESTER, CHRIS
Address: 10618 TIRANO COURT
City-St-Zip: FORT MYERS, FL 33913

Title: D (X) Change () Addition
Name: HOFFMAN, BEVERLY
Address: 9369 TRIESTE DRIVE
City-St-Zip: FT MYERS, FL 33913

Title: D (X) Change () Addition
Name: SMITH, CAROLYN
Address: 9361 TRIESTE DRIVE
City-St-Zip: FT MYERS, FL 33913

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: CASTOR, ROBERT
Address: 9366 TRIESTE DRIVE
City-St-Zip: FORT MYERS, FL 33913

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT E GELLES

CAM

03/10/2009

Electronic Signature of Signing Officer or Director

_____ Date