

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05474

FILED  
Feb 02, 2011  
Secretary of State

**Entity Name:** PELICAN BAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PELICAN BAY  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 175  
GOLDENROD, FL 327330175

**New Mailing Address:**

**FEI Number:** 59-2616320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

APPLE, DEBORAH  
1448 PELICAN BAY TRAIL  
WINTER PARK, FL 32792 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: P  
Name: MAUSNER, ELLIOT  
Address: 1412 PELICAN BAY TRAIL  
City-St-Zip: WINTER PARK, FL 32792

Title: T  
Name: APPLE, DEBBIE  
Address: 1448 PELICAN BAY TRAIL  
City-St-Zip: WINTER PARK, FL 32792

Title: VP  
Name: LEMMON, BILL  
Address: 1433 PELICAN BAY TRAIL  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: SENFT, MARK  
Address: 3317 OLDE WHARF RUN  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: SWANSON, CAROL  
Address: 3309 FISHERMAN'S COVE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: WOLFORD, MICHAEL  
Address: 1424 PELICAN BAY TRAIL  
City-St-Zip: WINTER PARK, FL 32792

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: DEBBIE APPLE

T

02/02/2011

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

\_\_\_\_\_  
Date