## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000004684

FILED Jul 07, 2009 Secretary of State

Entity Name: PEARL LAKE ESTATES HOMEOWNERS' ASSOCIATION

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

917 EAST FIRST AVENUE 2691 PEARL LAKE TRAIL

NEW SMYRNA BEACH, FL 32169 NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

917 EAST FIRST AVENUE 2691 PEARL LAKE TRAIL

NEW SMYRNA BEACH, FL 32169 NEW SMYRNA BEACH, FL 32168

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HARRISON, BRAD
917 EAST FIRST AVENUE
HARRISON, BRAD
2691 PEARL LAKE TRAIL

NEW SMYRNA BEACH, FL 32169 US NEW SMYRNA BEACH, FL 32168 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: 07/07/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: GARDINER, ARTHUR Name: GARDINER, ARTHUR
Address: 917 EAST FIRST AVENUE Address: 2354 TAYLOR RD

City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: NEW SMYRNA BEACH, FL 32168

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

 Name:
 PEARSON, DANIEL
 Name:
 PEARSON, DANIEL

 Address:
 917 EAST FIRST AVENUE
 Address:
 215 FOXPLACE

City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: PORT ORANGE, FL 32127

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

Name:HARRISON, BRADName:HARRISON, BRADAddress:917 EAST FIRST AVENUEAddress:2691 PEARL LAKE TRAILCity-St-Zip:NEW SMYRNA BEACH, FL 32169City-St-Zip:NEW SMYRNA BEACH, FL 32168

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: BRAD HARRISON DS 07/07/2009