

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06042

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** PELICAN PLACE NORTH CONDOMINIUM ASSOCIATION OF BELLEAIR, INC.

**Current Principal Place of Business:**

11350 66TH ST N  
SUITE 124  
LARGO, FL 33773

**New Principal Place of Business:**

24,26,28,30,32,34,36 THRU 83  
BELLEAIR, FL 33756

**Current Mailing Address:**

11350 66TH ST N  
SUITE 124  
LARGO, FL 33773 US

**New Mailing Address:**

**FEI Number:** 59-2637945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLIDAY ISLES PROPERTY MANAGEMENT, INC.  
11350 66TH ST N  
SUITE 124  
LARGO, FL 33773 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: VPD  
Name: LUDDEN, CAY  
Address: 66 PELICAN PLACE  
City-St-Zip: BELLEAIR, FL 33756

Title: SD  
Name: CUMMINGS, GEORGEANN  
Address: 53 PELICAN PLACE  
City-St-Zip: CLEARWATER, FL 33756

Title: TD  
Name: BOWEN, MARILYN  
Address: 41 PELICAN PLACE  
City-St-Zip: BELLEAIR, FL 33756

Title: PD  
Name: ALBRIGHT, MERRILEE  
Address: 49 PELICAN PLACE  
City-St-Zip: BELLEAIR, FL 33756

Title: D  
Name: DESMARAIS, ED  
Address: 28 PELICAN PLACE  
City-St-Zip: CLEARWATER, FL 33756

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: MERRILEE ALBRIGHT

PD

02/18/2011

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

\_\_\_\_\_  
Date