

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010589

FILED
Jan 08, 2010
Secretary of State

Entity Name: PELICAN POINTE WOMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

754 BACK NINE DRIVE
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

754 BACK NINE DRIVE
VENICE, FL 34285

New Mailing Address:

FEI Number: 26-1352141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLITOR, HELEN
754 BACK NINE DRIVE
VENICE, FL 34285 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: FREDERICK, FRAN
Address: 1913 SAN SILVESTRO DRIVE
City-St-Zip: VENICE, FL 34285

Title: VPD
Name: FARELL, DIANE
Address: 1017 GROUSE WAY
City-St-Zip: VENICE, FL 34295

Title: DS
Name: WYSHNER, BARBARA
Address: 857 BLUE CRANE DR
City-St-Zip: VENICE, FL 34292

Title: TD
Name: MOLITOR, HELEN
Address: 754 BACK NINE DRIVE
City-St-Zip: VENICE, FL 34285

Title: D
Name: HUNTER, MARIANN
Address: 814 BLUE CRANE DR
City-St-Zip: VENICE, FL 34292

Title: D
Name: HARRISON, ANNE
Address: 811 BLUE CRANE DRIVE
City-St-Zip: VENICE, FL 34285

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: HELEN MOLITOR

TD

01/08/2010

Electronic Signature of Signing Officer or Director

Date