## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09036

FILED Apr 26, 2006 Secretary of State

Entity Name: THE PELICANS CONDOMINIUM ASSOCIATION, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
	ETCHER AVE DINA BEACH, F						
Current Mailing Address:				New Mailing Address:			
PO BOX 19 YULEE, FL	987 . 320411987						
FEI Number:	59-2542342	FEI Number Applied For ( )	FEI Num	ber Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:	
POWELL, TERRELL J 463499 SR 200 YULEE, FL 32097 US				PROPERTY MANAGEMENT SYSTEMS INC 463499 SR 200 YULEE, FL 32097 US			
	named entity s of Florida.	submits this statement for the po	urpose of	changing it	s registered	office or registered agent, or both,	
SIGNATURE: TERRELL J POWELL						04/26/2006	
	Electron	ic Signature of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	GEIGER, PETE 3460 S FLETCH			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LECKER, JOHN 7 RED CEDAR I			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () GRIFFIN, LYND 576 CHESTNUT CHATTANOOGA	ST		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD () SLATE, BETTY 172 PINE VALLI TOCCOA, GA 3			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	KIERNAN, EL CLADDANUR		

I hereby certify that the information supplied with this filing does not qualify for the 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: PETE GEIGER Ρ 04/26/2006