## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N10019

1. Entity Name
PELICAN POINTE OF SEBASTIAN II CONDOMINIUM



FILED
Apr 01, 2005 8:00 am
Secretary of State
•

04-01-2005 90026 021 \*\*\*\*61.25

ASSOCIATION, INC.										
Principal Place of Business  ELLIOTT MERRILL  835 20TH PL  VERO BEACH, FL 32960 US  Mailing Address  ELLIOTT MERRILL  835 20TH PL  VERO BEACH, FL 32960 US				so us		 	HAL BETAL JURIE TOU BEAK BLOK BLOK	ST 8584 81911 818	8(8) Ti 108)	
2. Principal Place of Business 3. Ma			Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03142005 Chg-NP CR2E037 (10/03)				
City & State			City & State			4. FEI Number 65-0021347	7		optied For ot Applicable	
Zip Country		Z	Zip Country			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
	6. Name and Address of Cu	rrent Register	ed Agent			7. Name and Addre	ess of New Registered	Agent		
115000 11000				Nam	Name					
MERRIL, KAREN ELLIOTT MERRILL COMMUNITY MGMT 835 20TH PL				Stree	Street Address (P.O. Box Number is Not Acceptable)					
VERO BEA	ACH, FL 32963									
				City		FL Zip Code				
	named entity submits this statentions of registered agent.	nent for the pur	pose of changing its	registered offic	e or register	red agent, or both, in t	he State of Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registere	d agent and litle if ag	plicable. (NOTE	: Registered Agent si	ignature requirec	d when reinstating)	DATE	<del></del>		
Filling Fee is \$61.25  9: Election Campaign F Due by May 1, 2005  Trust Fund Contribut					ng 🔲	\$5.00 May Be Added to Fees	Make check Florida Depar		4	
10.	OFFICERS A	ND DIRECTORS	3	11.		ADDITIONS/CHANGE	S TO OFFICERS AND DII	RECTORS IN	10	
TITLE	Р		☐ Delete	TITLE				Change	☐ Addition	
NAME	CONLEY, ROBERT			NAME						
STREET ADDRESS	5645-2 MARINA DR			Street addre	ess					
CITY-ST-ZIP	SEBASTIAN, FL 32958			CITY-ST-ZIP						
TITLE	VP		☐ Delete	TITLE	V. 1	P. E ASSISTA	UT SECRETARY	Change	☐ Addition	
NAME	MARSHALL, FRANK			NAME						
STREET ADDRESS	9660-2 ESTMARY WAY	_		STREET ADDRE		60-2 ESTUAR			1	
CITY-ST-ZIP	JENSEN BEACH, FL 3495	8 		CITY-ST-ZIP		ASTIAN, FL				
TITLE	TD		☐ Delete	TITLE	TO	4 455157AWT	secretacy	Change	Addition	
NAME	KEANE, SUSAN 573-1 MARINA DR			NAME DYDGET LDDDD		35- I MARINA	A-04-45			
STREET ADDRESS CITY-ST-ZIP	SEBASTIAN, FL 32958			STREET ADDRÉ	35 3 4 3	コライン・明代に以下	PRIVE		1	
				<b>-</b>		A 0 co. ee	Maria aa Cia			
TITLE NAME	SD WHIDDEN, KATHERINE		☐ Delete	TITLE NAME	50	E #35157407	TREASUREL	<b>Change</b>	☐ Addition	
STREET ADDRESS	5780-2 MARTHA DRIVE			STREET ADDRE	.ec				1	
CITY-ST-ZIP	SEBASTIAN, FL 32958			CITY-ST-ZIP						
TITLE	VP		Delete	TITLE	700	VE Da Pari	Traul Transfer	- Change	Addition	
NAME	FEST, VIRGINIA		Delete	NAME	UA.	ve robei	TSON Director	& VP &	A SSISTANT	
STREET ADDRESS	5708-3 MARINA DR.			STREET ADDRE	<sub>ss</sub>   57	40-2 MAR	INA DR	7 7.1.7	TERASURER	
CITY-ST-ZIP	SEBASTIAN, FL 32758			CITY-ST-ZIP	Sea	BASTIAN, FL	32958			
TITLE			□ Delete	TITLE	+==-	= 1.00 000, 0 (	<u> </u>	☐ Change	☐ Addition	
NAME			Jeioto	NAME				- 0.10118v		
STREET ADDRESS	,			STREET ADDRE	ss					
CITY-ST-ZIP				CITY-ST-ZIP						
12. I hereby	certify that the information supplie	ed with this filing	does not qualify for	the exemption	stated in Se	ection 119.07(3)(i) Flor	rida Statutes. I further cer	tify that the in	nformation	

Independent on this report or supplies with this lifting does not qualify for the exemption stated in Section 119.07(3)(I). Florida Statutes. I further certify 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.