

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10019

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** PELICAN POINTE OF SEBASTIAN II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ELLIOTT MERRILL  
835 20TH PL  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

**Current Mailing Address:**

ELLIOTT MERRILL  
835 20TH PL  
VERO BEACH, FL 32960 US

**New Mailing Address:**

**FEI Number:** 65-0021347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCKINNON, CHARLES ESQ  
3055 CARDINAL DRIVE STE 302  
VERO BEACH, FL 32963 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: VP/S  
Name: CONLEY, MARION  
Address: 5645-2 MARINA DR #14B2  
City-St-Zip: SEBASTIAN, FL 32958

Title: P  
Name: MCARTHUR, DONALD  
Address: 5700-1 PELICAN POINTE DR #23B1  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP  
Name: CARR, ROBERT  
Address: 5765-4 PELICAN POINTE DR  
City-St-Zip: SEBASTIAN, FL 32958

Title: T  
Name: MARSHALL, FRANK  
Address: 9660-2 ESTUARY WAY  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP  
Name: BRENNAN, KAREN  
Address: 5740-3 PELICAN POINTE DR  
City-St-Zip: SEBASTIAN, FL 32958

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: DON MCARTHUR

PRES

04/21/2011

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

\_\_\_\_\_  
Date