FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 20 1997 8:00am

Secretary of State

Sandra B. Mortham ,

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # N10504

STREET ADDRESS

SIGNATURE

(1)

PELICAN LANDING OWNER'S ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address		i sooriya. Bar iyeyi bolat dilini dori	nian dibin dinsa kanil nenti nikil nebia 1061
10441 S.W. 64T Miami Fl 33173		10441 S.W. 64TH STREET MIAMI FL 33173-2812		·	
				3. Date Incorporated or Qualified 07/31/1985	3a. Date of Last Report 08/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2161	OCEAN BAY DRIVE	26 11750 S.	W. 95 Ave	65-0123250	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e LARGO, FL	City & State 28 MIAMI, F	ēΤ.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability fo	
24 3303	37 25 USA	29 33176	USA		Yes KNo
	9. Name and Address of Current			10. Name and Address of New F	legistered Agent
			81 Name		
SOBERON, EVELYN 82 Street Addre				NTHIA BAGWELL. Address (P.O. Box Number is Not Accepte	abie)
10441 SW 64 ST			1.1.1.1	750 S. W. 95 Ave.	
MIAMI FL	L 33173		83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617 0502	and 617 1508. Florida Statute	s the above-named	corporation submits this statement for the	Durnosa of changing its registered
office or r	egistered agent, or both, in the State of amiliar with, and accept the obliga	of Florida. Such change was au	ithorized by the corr	poration's board of directors. I hereby acc	ept the appointment as registered
	I wished I laso mich				
SIGNATURE	Synature, typed or ported name of registived agen	or and title of a Change thia (N.B.)	Stelled agent signals	Pagoires Cheri Teirfs (Ming)	1/15/97
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
THILE	PD	∑ DELETE	1.1 TITLE	President	Change 🙀 Addition
NAME	SOBERON, EVELYN		1.2 NAME	Orlando Rodriguez	
STREET ADDRESS	10441 S.W. 64TH STREET		1.3 STREET ADDRESS	2630 S. W. 113 Ave	.
CITY-ST-ZIP TITLE	MIAMI FL 33173 VPD	DELETE	1.4 CITY-ST-7IP.	Wiami, FL 33165	Change Addition
NAME	BAGWELL, CYNTHIA	-7K	2.2 NAME	Vice President	and original and readings.
STREET ACCORESS	11750 S.W. 95TH AVENUE		2.3 STREET ADDRESS	Evelyn Soberon	_
CITY - S1-7IP	MIAMI FL 33176		2 4 CITY-ST	10441 S. W. 64 Str	eet
THE	ST	🔀 DELETE	3.1 TITLE	Miami, FL 33173	Change 3 Addition
NAME	RODRIGUEZ, NEREIDA		3.2 NAME	Secretary	
STREET ADDRESS	2630 SW 133 AVE		3.3 STREET ADDRESS	Cynthia Bagwell 11750 S. W. 95 Ave	
CITY - S1 - 7IP	MIAMI FL 33165	☐ DELETE	3.4. CITY-ST-ZIP	Miami, FL 33176	
TITLE NAME		f" nereie	4.1 TITLE	HIUMI, ID 00170	Change Addition
STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE	N	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS		_	5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		

63 STREET ADDRESS 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.