

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18273

FILED
Apr 15, 2009
Secretary of State

Entity Name: GLENCOVE IN PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5800 GLENCOVE DRIVE
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMiami TRAIL E.
NAPLES, FL 34113 US

New Mailing Address:

FEI Number: 59-2750915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDMAN, ELLEN A ESQ
PORTER WRIGHT MORRIS & ARTHUR LLP
5801 PELICAN BAY BLVD., STE. 300
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

EAGLE PROPERTY MANAGEMENT
1337 EGRET LANDING
#102
NAPLES, FL 34108 US

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: JOHN BLANCHARD

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: ZAGEL, RON
Address: 5813 GLENCOVE DR #110
City-St-Zip: NAPLES, FL 34108

Title: VD () Delete
Name: KEEGAN, BOBBIE
Address: 5815 GLENCOVE DR #1208
City-St-Zip: NAPLES, FL 34108

Title: PD () Delete
Name: MAUDLIN, VERA
Address: 5802 GLENCOVE DRIVE #303
City-St-Zip: NAPLES, FL 34108

Title: SD () Delete
Name: GLEIXNER, GENE
Address: 5800 GLENCOVE DR, #201
City-St-Zip: NAPLES, FL 34108

Title: VD () Delete
Name: GIFFORD, CATHRINE
Address: 5815 GLENCOVE DR 1203
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: DUSEL, JOANNE
Address: 15 EASTERN PARKWAY
City-St-Zip: AUBURN, NY 13021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VERA MAUDLIN

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date