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Mar 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N22709 (2)

1. Corporation Name
PELICAN COVE CONDOMINIUM ASSOCIATION OF CRYSTAL RIVER, INC.



Principal Place of Business 11036 W COVE HARBOR DR CRYSTAL RIVER FL 34428 US		Mailing Address 324 NW 9th AVE CRYSTAL RIVER FL 34428 US	
2. Principal Place of Business 21 10986 W Cove Harbor Dr Suite, Apt. #, etc. Box 4	2a. Mailing Address 26 Pelican Cove Condominiums Suite, Apt. #, etc.	3. Date Incorporated or Qualified 09/28/1987	4. FEI Number 59-2956464
22 City & State Crystal River, FL 34428	27 City & State Crystal River, FL	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
23 Zip 34428	28 Country Citrus	7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No
24 Zip 34428	25 Country Citrus	29 Zip 34428	30 Country Citrus

9. Name and Address of Current Registered Agent
**EYSTER, JAMES P.
7655 WEST GULF TO LAKE HIGHWAY
SUITE 14
CRYSTAL RIVER FL 32620**

5. Date Incorporated or Qualified
09/28/1987

4. FEI Number
59-2956464

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent
**Leanne Hadsell, Citrus Mgmt Services
13 Dogwood Drive
Homosassa, FL 34446**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Leanne Hadsell Leanne Hadsell DATE 3/2/98

12. OFFICERS AND DIRECTORS	
TITLE D	☒ DELETE
NAME HAYNES, LINDA	
STREET ADDRESS 11036 W COVE HARBOR DR	
CITY-ST-ZIP CRYSTAL RIVER FL	
TITLE D & P	☐ DELETE
NAME WIDAK, JOE	
STREET ADDRESS 11020 W COVE HARBOR DR	
CITY-ST-ZIP CRYSTAL RIVER FL	
TITLE D	☐ DELETE
NAME GARY, ANNE	
STREET ADDRESS 10934 W COVE HARBOR DR	
CITY-ST-ZIP CRYSTAL RIVER FL	
TITLE Ed Alexander	☐ DELETE
NAME Ed Alexander	
STREET ADDRESS 11036 W Cove Harbor Dr	
CITY-ST-ZIP CRYSTAL RIVER, FL 34428	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Dir & Pres
2.3 STREET ADDRESS	Joe Widak
2.4 CITY-ST-ZIP	11020 W Cove Harbor Dr Crystal River, FL 34428
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Dir, Sec/Treas
3.3 STREET ADDRESS	Annie Gray
3.4 CITY-ST-ZIP	10934 W Cove Harbor Drive Crystal River, FL 34428
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Dir & V.P.
4.3 STREET ADDRESS	Ed Alexander
4.4 CITY-ST-ZIP	11036 W Cove Harbor Drive Crystal River, 34428
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	Dir
5.3 STREET ADDRESS	Susie Cottrell
5.4 CITY-ST-ZIP	10922 W Cove Harbor Drive Crystal River, FL 34428
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Dir & 2nd VP
6.3 STREET ADDRESS	Dennis Lown
6.4 CITY-ST-ZIP	11056 W Cove Harbor Drive Crystal River, FL 34428

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: Annie G. Gray 3/2/98 252-795-4666

CR2E037 (10/97)