

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27971

FILED
Mar 29, 2006
Secretary of State

Entity Name: PELICAN LANDING COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

24501 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

24501 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 65-0082916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTEL, MARIE
24501 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 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: P () Delete
Name: SULLIVAN, THOMAS
Address: 25160 GOLDCREST DRIVE #812
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP () Delete
Name: MANUEL, THOMAS
Address: 24451 WOODSAGE DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S () Delete
Name: MINER, WARREN
Address: 3663 HERON POINT COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: T () Delete
Name: HUGHES, JAMES
Address: 25024 PINEWATER COVE LANE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: HJORTAAS, ANDREW
Address: 24201 WALDEN CENTER DRIVE SUITE 206
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change () Addition
Name: MOEHRING, THOMAS
Address: 3624 GLENWATER LANE
City-St-Zip: BONITA SPRINGS, FL 34134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIE MARTEL

RA

03/29/2006

Electronic Signature of Signing Officer or Director

Date