

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27971

FILED  
Apr 05, 2007  
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: MOEHRING, THOMAS  
Address: 3624 GLENWATER 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: ( ) 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 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: WARREN MINER

S

04/05/2007

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

\_\_\_\_\_  
Date