2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008
Secretary of State

DOCUMENT# N27971

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:	S	(X) Change ( ) Addition
Name:	BETTS, THOMAS	
Address:	25071 PENNYROYAL DRIVE	
City-St-Zip:	BONITA SPRINGS, FL 34134	
Title:	T	(X) Change ( ) Addition
Name:	SMART, PATRICIA	
Address:	25031 BAY CEDAR DRIVE	
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 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: THOMAS SULLIVAN PRES 03/27/2008

Electronic Signature of Signing Officer or Director — Date