2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27971

1. Entity Name

PELICAN LANDING COMMUNITY ASSOCIATION, INC.



04-22-2003 90070 030 ****61.25

FILED

Apr 22, 2003 8:00 am Secretary of State

Principal Place of Business Mailing Address

24830 BURNT PINE DR 24830 BURNT PINE DR
SUITE #3 SUITE #3

BONITA SPRINGS FL 34134 BONITA SPRINGS FL 3

2. Principal Place of Business 24501 Walden Center Drive 245

Suite, Apt. #, etc. Suite

SUITE #3
BONITA SPRINGS FL 34134
US
3. Mailing Address

3. Mailing Address 24501 Walden Center Drive

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State Bonita Springs, FL 7025 City & State Bonita Springs, FL IIII Applied For 4. FEI Number 65-0082916 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 34134 34134 Fee Required 6. Name and Address of Current Registered Agent - ----7.: Name and Address of New Registered Agent-

MARTEL, MARIE 24830 BURNT PINE DRIVE SUITE #3 BONITA SPRINGS FL 34134 Marie Martel

Street Address (P.O. Box Number is Not Acceptable)

24501 Walden Center Drive

City Bonita Springs,

 \Box

FL Zip Code 34134

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE .

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DP TITLE TX Delete TITLE President □ Change Addition GILLILAND, GEORGE NAME NAME Michael DeVito 24881 GOLDCREST DRIVE STREET ADDRESS STREET ADDRESS 3636 Olde Cottage Lane CITY-ST-7IP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 Vice President TITLE Delete
 De TITLE Change ☐ Addition LEE. ROBERT NAME NAME Barbara Akins STREET ADDRESS STREET ADDRESS 24721 HOLLYBRIER LANE 3609 Glenwater Lane CITY-ST-ZIP CITY - ST-ZIP BONITA SPRINGS FL 34134 Bonita Springs FL 34134 TITLE ☐ Delete TITLE Secretary Change X Addition NAME AKINS, BARBARA NAME Warren Miner STREET ADDRESS 3609 GLENWATER LANE STREET ADDRESS 3663 Heron Point Court CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 TITLE Delete TITE F Treasurer ☐ Change Addition GILLILAND, GEORGE NAME NAME Mary McVay STREET ADDRESS STREET ADDRESS 24881 GOLDCREST DRIVE 3720 Bay Creek Court CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 D X Delete 🙀 Addition TITLE TITLE 🖵 Change Director NAME FLINN, MILT NAME Stefan Johansson STREET ADDRESS STREET ADDRESS 24201 WALDEN CENTER DRIVE SUITE 206 24201 Walden Center Drive Suite 206 CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 TITLE DT ☐ Delete TITLE Change Addition NAME MCVAY, MARY NAME STREET ADDRESS STREET ADDRESS 320 BAY CREEK COURT CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CANALUSE REDITIONS

4/17/03

HZEU3/ (10/0Z)