2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N28623

1. Entity Name

PELICAN WALK #1 CONDOMINIUM ASSOCIATION, INC.



FILED Apr 16, 2007 08:00 All Secretary of State

Principal Place of Business

290 CELESTIAL WAY JUNO BEACH, FL 33408 Mailing Address

C/O PELICAN WALK CONDO. 290 CELESTIAL WAY APT 4 JUNO BEACH, FL 33408



DO NOT WRITE IN THIS SPACE

04122007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2093351

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEDRAL, WILLIAM 290 CELESTIAL WAY APT 4 JUNO BEACH, FL 33408 DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for tions of registered agent.	the purpose of changing its registere	d office or r	egistered agent, or bot	th, in the State of Flo	orida. I am familiar with	1, and accept
SIGNATURE.					À		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argusture required when renstating) DATE							
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Finand Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS							
TITLE	PD				•		
NAME	WEDRAL, WILLIAM				i ce	000000000	İ
CTOCCT ADDRESS	COO OF FORM MANY AREA						

STREET ADDRESS 290 CELESTIAL WAY APT 4 CITY-ST-7IP JUNO BCH, FL 33408 VPD TITLE NAME MARINO, MICHAEL STREET ADDRESS 290 CELESTIAL WAY APT 2 CITY-ST-ZIP JUNO BCH, FL 33408 TITLE TSD NAME WEDRAL, ELAINE STREET ADDRESS 290 CELESTIAL WAY APT 4 CITY-ST-ZIP JUNO BEACH, FL 33408 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

U00000709464 04/25/07-80004-009 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Fforlda 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 of 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:

NAME STREET ADDRESS CITY-ST-ZIP

BULLETIN & WEDLAL WILLIAM R. WEDRAL, PERS.

4/12/07

561-799-4019

Deylane Phone #