

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33558

FILED  
Apr 08, 2009  
Secretary of State

**Entity Name:** CALAIS AT PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1044 CASTELLO DRIVE  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

1044 CASTELLO DRIVE  
SUITE 206  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 65-0140782      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOTHWEST PROPERTY MANAGEMENT CORP  
1044 CASTELLO DRIVE  
SUITE 206  
NAPLES, FL 34103 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: S ( ) Delete  
Name: COLLINS, JANET  
Address: 7048 PELICAN BAY BLVD, C102  
City-St-Zip: NAPLES, FL 34108

Title: T ( ) Delete  
Name: DAHNKE, RICHARD  
Address: 7008 PELICAN BAY BLVD., #H104  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: SHANE, CHARLIE  
Address: 7048 PELICAN BAY BLVD., #C305  
City-St-Zip: NAPLES, FL 34108

Title: P ( ) Delete  
Name: WILLIAMS, KENNETH  
Address: 7048 PELICAN BAY BLVD., #C203  
City-St-Zip: NAPLES, FL 34108

Title: VP ( ) Delete  
Name: MCCLURE, JOHN  
Address: 7008 PELICAN BAY BLVD #H502  
City-St-Zip: NAPLES, FL 34108

**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:

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: KENNETH WILLIAMS

P

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date