## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION ANNUAL REPORT** 1999



### FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# **DOCUMENT # N44398**

1. Corporation Name

#### PELICAN COVE II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

10966 W. COVE HARBOR DRIVE CRYSTAL RIVER FL 34428

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

11294 W. COVE HARBOR DRIVE CRYSTAL RIVER FL 34428

# **FILED** Mar 31, 1999 8:00 am § Secretary of State

03-31-1999 90005 022 \*\*\*\*61.25



3. Date Incorporated or Qualifed

07/23/1991

59-3084514

4. FEI Number

t t t t t t t t t t t t t t t t t t t	City & State	9	City & State				5. Certificate of Status Desire		\$8./5 Additional				
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Name  13. Name  14. Name and Address of New Registered Agent  15. Name  15. Name  16. Name and Address of New Registered Agent  17. Name and Address of New Registered Agent  18. Name  18. Sirved Address (P.O. Box Number is Not Acceptable)  18. Sirved Address (P.O. Box Number is Not Acceptable)  19. Sirved Address (P.O. Box Number is Not Acceptable)  19. Sirved Address (P.O. Box Number is Not Acceptable)  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Pursuant to the provision of Section 817 0502 and 617 1508. Florids Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes.  18. Sirved Address (P.O. Box Number is Not Acceptable)  19. Sirved Address (P.O. Box Number is Not Acceptable)  10. Name and Address of New Registered Agent  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not A	23			<u></u>						Fe	e Req	Ulrea (	
9. Name and Address of Current Registered Agent  FLYNN, MARTIN C 11294 W. COVE HARBOR DRIVE CRYSTAL RIVER FL 34428  11. Pursuant to the provisions of Sections 617,0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the obligations of, Section 17,0509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the obligations of, Section 17,0509, Florida Statutes.  SIGNATURE  11. Pursuant to the provisions of Sections 617,0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and except the obligations of, Section 17,0509, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CMY-61-2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change   Addition   16. Change   Add	<del></del>	· ·	<b>⊢</b>		ry								
FLYNN, MARTIN C 11294 W. COVE HARBOR DRIVE CRYSTAL RIVER FL 34428  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the description submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the opporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the opporation's board of directors. I hereby accept the appointment as registered agent agents required when reinfacting.  12.	57					110017 0110 0 0 111							
11/204 W. COVE HARBOR DRIVE CRYSTAL RIVER FL 34428  88   Step Code  11. Pursuant to the provisions of Sections 517,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and advanced the originations of, Section 517,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and eccept the collegations of, Section 517,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and advanced agent and the frapplication of, Section 517,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and agent agent and directors. I hereby accept the appointment as registered agent, and agent agent and applications to the provisions of Sections 517,0503, Policia Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and agent agent and applications of Sections 517,0503, Policia Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and agent agent and applications of Sections 517,0503, Policia Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and applications of Sections 517,0503, Policia Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and free from a policia Statutes. The application of Sections 517,050, Policia Statutes, the above-named corporation's board of directors. I hereby accept the appointment are registered agent and free from a policia Statutes. The application of Sections 517,050, Policia Statutes, the above-named corporati	Traine and Address of Carrott (Cagnete of Name					Name							
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CRYSTAL RIVER FL 34428  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  Signature, typed or prised rame of inequitered agent and a first application.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PO GROSS, PAUL A 12 NAME  GRYSTAL RIVER FL 34428  LA CITY-ST-ZIP  TITLE  VD DELETE 21 TITLE  VD DELETE 21 TITLE  VD DELETE 31 TITLE  CRYSTAL RIVER FL 34428  LA CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  GRYSTAL RIVER FL 34428  TITLE STD  FLYNN, MARTIN C  STREET ADDRESS  CRYSTAL RIVER FL 34428  TITLE  DELETE 41 TITLE  CRYSTAL RIVER FL 34428  TITLE  DELETE 41 TITLE  CRYSTAL RIVER FL 34428  TITLE  CRYST				8	Street Address (P.O. Box Number is Not Acceptable)								
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13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   12	SIGNATURE												
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NAME   GROSS, PAUL A   12 NAME   13 STREET ADDRESS   11064 W. COVE HARBOR DRIVE   13 STREET ADDRESS   14 CITY-ST-ZIP   CRYSTAL RIVER FL 34428   14 CITY-ST-ZIP   CRYSTAL RIVER FL 34428   14 CITY-ST-ZIP   CRYSTAL RIVER FL 34428   22 NAME   STREET ADDRESS   1164 W. COVE HARBOR DRIVE   23 STREET ADDRESS   CITY-ST-ZIP   CRYSTAL RIVER FL 34428   24 CITY-ST-ZIP   CRYSTAL RIVER FL 34428   24 CITY-ST-ZIP   CRYSTAL RIVER FL 34428   24 CITY-ST-ZIP   Change   Addition					:			-		Cha	ange	☐ Addition	
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NAME	CITY-ST-ZIP	CRYSTAL RIVER FL 34428			-ST	-ZIP							
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UIT-51-AP 1	STREET ADDRESS	·		1								j	
	CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for	100			Section 119.07(3)(i), Florida Stat	utes. I	further cert	ify that	the in	formation	

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Applied For

\$8.75 Additional

Not Applicable