

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000522

FILED
Apr 18, 2005
Secretary of State

Entity Name: THE POINTE OF PELICAN BAY I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

VIA MENZER
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 11209
NAPLES, FL 341011209 US

New Mailing Address:

FEI Number: 65-0482628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, BYRON
GUAFALAN PROPERTY MGMT
6700 LONE OAK BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

BLANCHARD, JOHN B
EAGLE PROPERTY MANAGEMENT
1337 EGRET'S LANDING #102
NAPLES, FL 34108 US

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: JOHN B BLANCHARD

04/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MORRIS, CHARLES
Address: 675 VIA MEZNOR - SUITE 102
City-St-Zip: NAPLES, FL

Title: DVP () Delete
Name: SNEE, JOHN
Address: 604 VIA MENZER - SUITE 1601
City-St-Zip: NAPLES, FL

Title: DT () Delete
Name: HARRICK, THOMAS
Address: 615 VIA MEZNER - SUITE #1701
City-St-Zip: NAPLES, FL

Title: DVP () Delete
Name: CALDER, ROBERT
Address: 600 VIA MEZNER #1501
City-St-Zip: NAPLES, FL 34108

Title: DS () Delete
Name: HENRY, GARTH
Address: 610 VIA MEZNER #1404
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: MATTHEWS, BERT
Address: 3431 DARDEN PL
City-St-Zip: WILLIAMSBURGQ, VA 23188

Title: DT (X) Change () Addition
Name: HENRY, GARTH
Address: 2248 PEBBLE COVE
City-St-Zip: WESTLAKE, OH 44145

Title: DS (X) Change () Addition
Name: SCHWARZ, DOLORES
Address: 1731 STANFORD CT
City-St-Zip: LAKE FOREST, IL 60045

Title: D (X) Change () Addition
Name: GALLARY, PETER H
Address: 88 LOWELL RD
City-St-Zip: WELLESLEY, MA 02481

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHUCK MORRIS

PD

04/18/2005

Electronic Signature of Signing Officer or Director

Date