

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000522

FILED
Apr 28, 2006
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:

BLANCHARD, JOHN B
EAGLE PROPERTY MANAGEMENT
1337 EGRET'S LANDING #102
NAPLES, FL 34108 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: DP () Delete
Name: MORRIS, CHARLES
Address: 675 VIA MEZNOR - SUITE 102
City-St-Zip: NAPLES, FL

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

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

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

Title: D () Delete
Name: GALLERY, PETER H
Address: 88 LOWELL RD
City-St-Zip: WELLESLEY, MA 02481

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:

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

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

DP

04/28/2006

Electronic Signature of Signing Officer or Director

Date