

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000522

FILED  
Apr 17, 2007  
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:**

COLLIER FINANCIAL, INC.  
4985 TAMiami TRAIL E.  
NAPLES, FL 34113 US

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

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

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

Title: D (X) Change ( ) Addition  
Name: WARREN, PHILLIP  
Address: 119 MIDDLETON CIRCLE  
City-St-Zip: NASHVILLE, TN 37215

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

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date