

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000003311

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** LES PELICANS (THE PELICANS) CONDOMINIUM ASSOCIATION OF DADE COUNTY, INC.

**Current Principal Place of Business:**

18260 N BAY ROAD  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

10112 USA TODAY WAY  
HOLLYWOOD, FL 33025

**New Mailing Address:**

**FEI Number:** 65-0499770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SKRBIN, GEORGE  
10112 USA TODAY WAY  
HOLLYWOOD, FL 33025 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: P  
Name: DUPLAIN, RAYMOND  
Address: 18260 NORTH BAY RD SUITE 712  
City-St-Zip: SUNNY ISLE, FL 33160

Title: V P  
Name: WARNER, TYSON  
Address: 18260 NORTH BAY ROAD UNIT 512  
City-St-Zip: SUNNY ISLES, FL 33160

Title: TD S  
Name: BIGRAS, YVES  
Address: 18260 NORTH BAY RD UNIT 704  
City-St-Zip: SUNNY ISLES, FL 33160

Title: D  
Name: ASSELIN, YOLANDE  
Address: 18260 N BAY RD 306  
City-St-Zip: SUNNY ISLES, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: RAYMONDE DUPLAIN

P

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date