

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000233

FILED
Apr 22, 2009
Secretary of State

Entity Name: PELICAN PIER HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

7 OAK DR
ELLENTON, FL 34222 US

New Principal Place of Business:

72 BASIN ST
ELLENTON, FL 34222 US

Current Mailing Address:

7 OAK DR
ELLENTON, FL 34222 US

New Mailing Address:

72 BASIN ST
ELLENTON, FL 34222 US

FEI Number: 65-0577392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, DAVID P
2103 MANATEE AVENUE WEST
BRADENTON, FL 34205 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: PD () Delete
Name: BENNETT, DOUG
Address: 7 OAK DR
City-St-Zip: ELLENTON, FL 34222

Title: VD () Delete
Name: VAN HALL, CHARLES
Address: 36 RIVERVIEW DR
City-St-Zip: ELLENTON, FL 34222

Title: TD () Delete
Name: GASELL, JOHN
Address: 50 PALM DR
City-St-Zip: ELLENTON, FL 34222

Title: D () Delete
Name: FAISBIE, WILLIAM
Address: 51 PALM DR
City-St-Zip: ELLENTON, FL 34222

Title: SD () Delete
Name: SYLVESTER, JAYNE
Address: 46 PALM DR
City-St-Zip: ELLENTON, FL 34222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUNT, RICHARD
Address: 7 OAK DR
City-St-Zip: ELLENTON, FL 34222

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

Title: TD (X) Change () Addition
Name: FITZGERALD, MICHAEL
Address: 72 BASIN ST
City-St-Zip: ELLENTON, FL 34222

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 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: MICHAEL FITZGERALD

TD

04/22/2009

Electronic Signature of Signing Officer or Director

Date