2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Apr 22, 2005 8:00 am
Secretary of State
04-22-2005 90261 045 ****61.25

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03282005 Chg-NP CR2E037 (10/03)

DOCUMENT # N95000003597

1. Entity Name
THE RESIDENCES AT PELICAN ISLE YACHT CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
886 1110 AVE N. STE 7 NAPLES, FL 34108	886 1110 AVE N. STE 7 NAPLES, FL 34108 US

2. Principal Place of Business	3. Mailing Address
c/o Integrated Property Mgmt.	c/o Integrated Property Mgmt.
Suite, Apt. #, etc. 3435 - 10th Street N., #201	Suite, Apt. #, etc. 3435 - 10th Street N., #201
City & State Naples, FL	City & State Naples, FL
Zip 34103 Country	Zip 34103 Country

4. FEI Number
59-3347295
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WARNER, BRYAN J
886 110TH AVE N
#7
NAPLES, FL 34108

7. Name and Address of New Registered Agent

Name: Samouce, Robert C.
Street Address (P.O. Box Number is Not Acceptable): 5405 Park Central Court
City: Naples **FL** Zip Code: 34109

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Robert Samouce [redacted] 4/18/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BROOKMAN, MICHAEL 435 DOCKSIDE DR., #601 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Brookman, Micky 435 Dockside Drive, #0601 Naples, FL 34110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOODELL, CHARLES 425 DOCKSIDE DR., #206 NAPLES, FL 34110	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Pendleton, James 425 Dockside Drive, #0605 Naples, FL 34110	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MULLINEX, GARY 425 DOCKSIDE DR., #805 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Mullennix, Gary 425 Dockside Drive, #0805 Naples, FL 34110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POFAHL, ROSEMARY 445 DOCKSIDE DR., #802 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Pofahl, Rosemary 445 Dockside Drive, #0802 Naples, FL 34110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COOPER, ROBERT 445 DOCKSIDE DR., #501 NAPLES, FL 34110	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Cooper, Robert 445 Dockside Drive, #0501 Naples, FL 34110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Frane, Graig 435 Dockside Drive, #0402 Naples, FL 34110	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert A Cooper 4-14-05 239-5435[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #