2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# N95000003597

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

Current Principal Place of Business:

435 DOCKSIDE DR
UNIT #203
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

435 DOCKSIDE DR
UNIT #203
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 59-3347295 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAMOUNCE, ROBERT C.
5405 PARK CENTRAL COURT
NAPLES, FL 34109 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: FRANE, CRAIG
Address: 435 DOCKSIDE DR, UNIT 402
City-St-Zip: NAPLES, FL 34110

Title: VPD ( ) Delete
Name: POFAHL, ROSEMARY
Address: 445 DOCKSIDE DR, UNIT 802
City-St-Zip: NAPLES, FL 34110

Title: SD ( ) Delete
Name: DODIE, BRISKEY
Address: 425 DOCKSIDE DR, UNIT 501
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete
Name: NICHOLAS, MINDY
Address: 445 DOCKSIDE DR, UNIT 701
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: FOSTER, GENE
Address: 435 DOCKSIDE DR, UNIT 401
City-St-Zip: NAPLES, FL 34110

Title: CAM ( ) Delete
Name: RIDDELL, GIL
Address: 435 DOCKSIDE DR, UNIT 203
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FRANE, CRAIG
Address: 435 DOCKSIDE DR, UNIT 402
City-St-Zip: NAPLES, FL 34110

Title: SD (X) Change ( ) Addition
Name: CORDERO, CATHERINE A
Address: 445 DOCKSIDE DR, UNIT 902
City-St-Zip: NAPLES, FL 34110

Title: VPD (X) Change ( ) Addition
Name: DODIE, BRISKEY
Address: 425 DOCKSIDE DR, UNIT 501
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change ( ) Addition
Name: NICHOLAS, MINDY
Address: 445 DOCKSIDE DR, UNIT 701
City-St-Zip: NAPLES, FL 34110

Title: TD (X) Change ( ) Addition
Name: FOSTER, GENE
Address: 435 DOCKSIDE DR, UNIT 401
City-St-Zip: NAPLES, FL 34110

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: GIL RIDDELL CAM 04/01/2009

Electronic Signature of Signing Officer or Director — Date