2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003597

FILED Mar 29, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

435 DOCKSIDE DR UNIT #203 NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

435 DOCKSIDE DR UNIT #203 NAPLES, FL 34110

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

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

SAMOUNCE, ROBERT C. 5405 PARK CENTRAL COURT NAPLES, FL 34109 US

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

Name: CORDERO, CATHERINE Address: 445 DOCKSIDE DR, UNIT #902

City-St-Zip: NAPLES, FL 34110

Title: VPD

Name: EUGENE, FOSTER

Address: 435 DOCKSIDE DR, UNIT #401

City-St-Zip: NAPLES, FL 34110

Title: SD

Name: RING, SUZANNE

Address: 425 DOCKSIDE DR, UNIT 705

City-St-Zip: NAPLES, FL 34110

Title: TD

Name: BALDADIAN, ARTHUR

Address: 425 DOCKSIDE DR, UNIT #901

City-St-Zip: NAPLES, FL 34110

Title:

Name: POFAHL, AL

Address: 445 DOCKSIDE DR, UNIT #802

City-St-Zip: NAPLES, FL 34110

Title:

Name: REUSS, RON

Address: 435 DOCKSIDE DR, UNIT 1003

City-St-Zip: NAPLES, FL 34110

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: CATHERINE CORDERO P 03/29/2012