

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005682

FILED
Apr 15, 2009
Secretary of State

Entity Name: PELICAN KEY AT WELLINGTON'S EDGE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10851 W. FOREST HILL BLVD.
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

10851 W. FOREST HILL BLVD.
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 65-0172686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, JOHN
% WELLINGTON MANAGEMENT
3461 B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 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 () Delete
Name: PANIAN, TIMOTHY
Address: 10757 PELICAN DRIVE
City-St-Zip: WELLINGSTON, FL 33414

Title: T () Delete
Name: PANIAN, CHERIE
Address: 10757 PELICAN DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: S () Delete
Name: AHMADABADI, PHYLIS
Address: 10706 PELICAN DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PANIAN, TIMOTHY
Address: 10757 PELICAN DRIVE
City-St-Zip: WELLINGSTON, FL 33414

Title: TD (X) Change () Addition
Name: PANIAN, CHERIE
Address: 10757 PELICAN DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: SD (X) Change () Addition
Name: BROWN, KESIA L
Address: 10706 PELICAN DRIVE
City-St-Zip: WELLINGTON, FL 33414

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: TIMOTHY PANIAN

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date