

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005382

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** PELICAN COVE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2390 PLACID DRIVE  
FT WALTON BEACH, FL 32547 US

**New Principal Place of Business:**

2389 PLACID DRIV  
FT WALTON BEACH, FL 32547 US

**Current Mailing Address:**

PO BOX 4045  
SHALIMAR, FL 32579 US

**New Mailing Address:**

**FEI Number:** 59-3511832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES, HENRY  
2388 PLACID DRIVE  
FORT WALTON BEACH, FL 32547 US

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

RANDAL, GARRETT  
2381 PLACID DRIVE  
FORT WALTON BEACH, FL 32547 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: RANDAL GARRETT

02/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: GARRETT, RANDAL  
Address: 2381 PLACID DRIVE  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: DV  
Name: SIMMONS, DAVE  
Address: 2399 PLACID DRIVE  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: DTS  
Name: ELLISON, MAJOR  
Address: 2389 PLACID DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: MAJOR ELLISON

DTS

02/15/2011

Electronic Signature of Signing Officer or Director

Date