2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000414

FILED Apr 21, 2012 Secretary of State

Entity Name: PELICAN BAY WOMEN'S LEAGUE INC.

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

503 SEREENDIPITY DRIVE 503 SERENDIPITY DRIVE NAPLES, FL 34108 US NAPLES, FL 34108 US

Current Mailing Address: New Mailing Address:

% P.O. BOX 770235 PMB #139
NAPLES, FL 341070235 P.O. BOX 413005
NAPLES, FL 34101

FEI Number: 59-3508426 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:

CLASP, INC 3001 TAMIAMI TRAIL N 4TH FLOOR NAPLES, FL 34103 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: PATTON, ROBERTA
Address: 660 VIA MEZNER #401
City-St-Zip: NAPLES, FL 34108

Title: VPD

Name: WERNETTE, BEVERLY
Address: 615 VIA MEZNER #1701
City-St-Zip: NAPLES, FL 34108

Title: VPD

Name: CANNING, MARGE

Address: 780 BENTWATER CIRCLE #204

City-St-Zip: NAPLES, FL 34108

Title: SD

Name: RAYBURN, TERRY

Address: 8171 BAY COLONY DRIVE #1501

City-St-Zip: NAPLES, FL 34108

Title: TE

 Name:
 STUART, CAROL

 Address:
 4500 VALEN WAY #403

 City-St-Zip:
 NAPLES, FL 34108

Title: FD

Name: SMITH, JOANNE K
Address: 503 SERENDIPITY DRIVE
City-St-Zip: NAPLES, FL 34108

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: JOANNE K. SMITH FD 04/21/2012