2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005098

FILED Mar 22, 2011 Secretary of State

Entity Name: THE ARBORS AT PELICAN POINTE HOMEOWNERS ASSOCIATION, INC.

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

PROGRESSIVE COMMUNITY MGMT 3701 SOUTH OSPREY AVE 1801 GLENGARY ST. - FL. 1 SARASOTA, FL 34239 U

SARASOTA, FL 34231

Current Mailing Address: New Mailing Address:

PROGRESSIVE COMMUNITY MGMT 3701 SOUTH OSPREY AVE 1801 GLENGARY ST. - FL. 1 SARASOTA, FL. 34239 US

1801 GLENGARY ST. - FL. 1 SARASOTA, FL 34239 SARASOTA, FL 34231

FEI Number: 59-3551910 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:

PROGRESSIVE COMMUNITY MGMT, INC.
1801 GLENGARY ST. - FL. 1

PROGRESSIVE COMMUNITY MGMT, INC.
3701 SOUTH OSPREY AVE

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.

SARASOTA, FL 34239

SIGNATURE: 03/22/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

SARASOTA, FL 34231

Title: SD

 Name:
 NORWOOD, JUDITH

 Address:
 3701 SOUTH OSPREY AVE

 City-St-Zip:
 SARASOTA, FL 34239

Title: TD

 Name:
 HARLOW II, JOHN

 Address:
 3701 SOUTH OSPREY AVE

 City-St-Zip:
 SARASOTA, FL 34239

Title: VPD

 Name:
 WATKINS, WARD

 Address:
 3701 SOUTH OSPREY AVE

 City-St-Zip:
 SARASOTA, FL 34239

Title: AS

Name: MARKEL, JIM

Address: 3701 SOUTH OSPREY AVE City-St-Zip: SARASOTA, FL 34239

Title: PD

 Name:
 CAPUANO, BARBARA

 Address:
 3701 SOUTH OSPREY AVE

 City-St-Zip:
 SARASOTA, FL 34239

Title: AT

 Name:
 SUTTON, WILLIAM

 Address:
 3701 SOUTH OSPREY AVE

 City-St-Zip:
 SARASOTA, FL 34239

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: WILLIAM SUTTON AT 03/22/2011