

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006124

FILED
Apr 11, 2009
Secretary of State

Entity Name: PELICAN BAY COMMUNITY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8600 U.S. HWY. #1
MICCO, FL 32976

New Principal Place of Business:

Current Mailing Address:

C/O PELICAN BAY MHC
8600 U.S. HWY. 1
MICCO, FL 32976

New Mailing Address:

FEI Number: 59-3607284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLING, LEE JAY ESQ.
529 VERSAILLES DR
STE. 103
MAITLAND, FL 32751 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: DP () Delete
Name: ALLEN, ROSAN
Address: 116 HARBORHILL DR.
City-St-Zip: MICCO, FL 32976

Title: DVP () Delete
Name: THOMPSON, RENELDA
Address: 158 STEAMBOAT DR.
City-St-Zip: MICCO, FL 32976

Title: DT () Delete
Name: RITTENHOUSE, THOMAS
Address: 198 HARBORHILL DR.
City-St-Zip: MICCO, FL 32976

Title: DS () Delete
Name: MOORE, DIANE
Address: 174 HOPETOWN RD.
City-St-Zip: MICCO, FL 32976

Title: D () Delete
Name: MARCHEK, THOMAS
Address: 122 HARBOR HILL DR.
City-St-Zip: MICCO, FL 32976

Title: D () Delete
Name: PERLEY, JOHN
Address: 190 OVERLOOK DR.
City-St-Zip: MICCO, FL 32976

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: MCCULLOUGH, JAMES
Address: 126 HARBORHILL DR..
City-St-Zip: MICCO, FL 32976

Title: DT (X) Change () Addition
Name: CREASER, ARLENE
Address: 132 HARBORHILL DR.
City-St-Zip: MICCO, FL 32976

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROSAN ALLEN

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

Date