

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007535

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** THE MASTERS AT PELICAN SOUND NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

MASTERS CIRCLE  
ESTERO, FL 33928 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9709  
NAPLES, FL 34101 US

**New Mailing Address:**

COLLIER FINANCIAL, INC.  
4985 TAMiami TRAIL E.  
NAPLES, FL 34113 US

**FEI Number:** 65-0971057

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, STEPHEN P  
4993 TAMiami TRAIL EAST  
NAPLES, FL 34113 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: VD ( ) Delete  
Name: ROESKE, JOAN  
Address: 21768 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928

Title: SD ( ) Delete  
Name: HOLTZ, MARCY  
Address: 21880 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928 US

Title: TD ( ) Delete  
Name: BIGG, GEORGE  
Address: 21736 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928 US

Title: PD ( ) Delete  
Name: PHILLIPS, JOHN  
Address: 21888 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928 US

Title: D ( ) Delete  
Name: TOLIUSZIS, JOHN  
Address: 21944 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: DENNEY, CHRISTOPHER  
Address: 21708 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN PHILLIPS

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date