

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098905

Entity Name: GRAND PELICAN BEACH, INC.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

139 LONG POINT DRIVE  
AMELIA ISLAND, FL 32034

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 768  
FERNANDINA BEACH, FL 32035

## New Mailing Address:

42 BRIANS WAY  
NORRIDGEWOCK, ME 04957

FEI Number: 54-2074599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KRUSE, STEPHAN L  
139 LONG POINT DRIVE  
AMELIA ISLAND, FL 32034 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KRUSE, STEPHAN L  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035 US

Title: VD ( ) Delete  
Name: KRUSE, JACQUELYN  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035 US

Title: VMD ( ) Delete  
Name: KRUSE, JR., STEPHAN L  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: EVPD ( ) Delete  
Name: KRUSE, CHRISTOPHER  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: SD ( ) Delete  
Name: KRUSE, SHERRI  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: TD ( ) Delete  
Name: KRUSE, ELIZABETH  
Address: PO BOX 768  
City-St-Zip: FERNANDINA BEACH, FL 32035

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VMD (X) Change ( ) Addition  
Name: KRUSE, JR., STEPHAN L  
Address: 42 BRIANS WAY  
City-St-Zip: NORRIDGEWOCK, ME 04957

Title: EVPD (X) Change ( ) Addition  
Name: KRUSE, CHRISTOPHER  
Address: 193 ROWE RD  
City-St-Zip: SKOWHEGAN, ME 04976

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

Title: TD (X) Change ( ) Addition  
Name: KRUSE, ELIZABETH  
Address: 42 BRIANS WAY  
City-St-Zip: NORRIDGEWOCK, ME 04957

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH KRUSE

TD

03/24/2009

Electronic Signature of Signing Officer or Director

Date