

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107836

FILED
Apr 28, 2009
Secretary of State

Entity Name: PELICAN ISLE CONDOMINIUM DEVELOPERS II, INC.

Current Principal Place of Business:

4 LAGUNA STREET
SUITE 201
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

4 LAGUNA STREET
SUITE 201
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 20-0268040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWEIZER, W. TODD
4 LAGUNA ST
201
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

SCHWEIZER, W. TODD
4 LAGUNA STREET
SUITE 201
FORT WALTON BEACH, FL 32548 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: W. TODD SCHWEIZER

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHWEIZER, TODD W
Address: 4 LAGUNA STREET
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP () Delete
Name: DEL GALLO, STEVEN
Address: 4 LAGUNA STREET, #201
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHWEIZER, W. TODD
Address: 4 LAGUNA STREET, SUITE 201
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP (X) Change () Addition
Name: DEL GALLO, STEVEN P
Address: 4 LAGUNA STREET, SUITE 201
City-St-Zip: FORT WALTON BEACH, FL 32548

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: W. TODD SCHWEIZER

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date