

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000064971**

1. Entity Name  
PELICAN BAY CONSTRUCTION, INC.



Principal Place of Business

25064 NECTAR COURT  
PUNTA GORDA, FL 33983

Mailing Address

25064 NECTAR COURT  
PUNTA GORDA, FL 33983



03272007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-2900254

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WEAVER, LINDA  
25064 NECTAR COURT  
PUNTA GORDA, FL 33983

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	WEAVER, TIMOTHY
STREET ADDRESS	25064 NECTAR COURT
CITY-ST-ZIP	PUNTA GORDA, FL 33983
TITLE	VP/D
NAME	WEAVER, LINDA
STREET ADDRESS	25064 NECTAR COURT
CITY-ST-ZIP	PUNTA GORDA, FL 33983
TITLE	T
NAME	WEAVER, LINDA
STREET ADDRESS	25064 NECTAR COURT
CITY-ST-ZIP	PUNTA GORDA, FL 33983
TITLE	S
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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04/25/07-80068-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-07

Date

Daytime Phone #