

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90099 050 ***150.00

DOCUMENT # P93000026839

1. Entity Name

PELICAN PIER PARTNERS CORP.

Principal Place of Business

3651 CORTEZ RD. WEST
 300
 BRADENTON FL 34210
 US

Mailing Address

3651 CORTEZ RD. WEST
 300
 BRADENTON FL 34210
 US

2. Principal Place of Business

3. Mailing Address

303 Ninth Street West
 Suite 201
 Bradenton, FL 34205

303 Ninth Street West
 Suite 201
 Bradenton, FL 34205

City & State

City & State

Zip

Country

MANATEE

Zip

Country

4. FEI Number

65-0407569

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAVELY, JEFFREY D
 3651 CORTEZ RD. WEST
 BRADENTON FL 34210

Name

Street Address (P.O. Box Number is Not Acceptable)

303 Ninth Street West
 Suite 201

City

Bradenton, FL 34205

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRAVELY, JEFFREY D #300 BRADENTON FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	303 Ninth Street West Suite 201 Bradenton, FL 34205	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SUMMERS, STEVE E #300 BRADENTON FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	303 Ninth Street West Suite 201 Bradenton, FL 34205	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BUSKIRK, FRANK A #300 BRADENTON FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	303 Ninth Street West Suite 201 Bradenton, FL 34205	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Steve E. Summers
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-02

Date

(941) 750-9494

Daytime Phone #

CR2E034 (9/01)