

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069170 (5)

1. Corporation Name

PELICAN LANDING COMMUNITIES, INC.

Principal Place of Business

Mailing Address

801 LAUREL OAK DRIVE
SUITE 500
NAPLES FL 34108
US

801 LAUREL OAK DRIVE
SUITE 500
NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/07/1995

4. FEI Number

25-1629089

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business
21 24301 Walden Center Drive

2a. Mailing Address
26 24301 Walden Center Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 300

27 Suite 300

City & State

City & State

23 Bonita Springs, FL

28 Bonita Springs, FL

Zip

Country

Zip

Country

24 34134

25 USA

29 34134

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HASTINGS, VIVEN N
801 LAUREL OAK DRIVE
SUITE 500
NAPLES FL 34108

81 Name Vivien Hastings

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

24301 Walden Center Drive

83 Suite 300

84 City Bonita Springs

FL

85 Zip Code
34134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Vivien Hastings

(NOTE: Registered Agent signature required when reinstating)

1/22/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME DP
STREET ADDRESS SCHMOYER, J.H.
CITY-ST-ZIP 801 LAUREL OAK DR, STE 500
NAPLES FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 24301 Walden Center Drive
1.4 CITY-ST-ZIP Bonita Springs, FL

TITLE ☐ DELETE

NAME DS
STREET ADDRESS HASTINGS, V. N
CITY-ST-ZIP 801 LAUREL OAK DRIVE, SUITE 500
NAPLES FL

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 24301 Walden Center Drive
2.4 CITY-ST-ZIP Bonita Springs, FL

TITLE ☒ DELETE

NAME DT
STREET ADDRESS CARLSON, A. J
CITY-ST-ZIP 801 LAUREL OAK DRIVE, SUITE 500
NAPLES FL

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME VD
3.3 STREET ADDRESS Katherine C. Green
3.4 CITY-ST-ZIP 24301 Walden Center Drive
Bonita Springs, FL

TITLE ☒ DELETE

NAME V
STREET ADDRESS WHITNEY, S.R.
CITY-ST-ZIP 801 LAUREL OAK DR, STE 500
NAPLES FL

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME T
4.3 STREET ADDRESS Steven C. Adelman
4.4 CITY-ST-ZIP 24301 Walden Center Drive
Bonita Springs, FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Vivien Hastings, Secretary

SIGNATURE:

Vivien Hastings

1/22/98

(941) 947-2600

CR2E034 (10/97)