

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90275 032 ***150.00

DOCUMENT # P96000052910

1. Entity Name
PELICAN COVE GIFTS, INC.



Principal Place of Business

6300 GULF BLVD.
SAINT PETERSBURG, FL 33706 US

Mailing Address

P.O. BOX 66160
ST PETERSBURG BEACH, FL 33736 US

94054340



DO NOT WRITE IN THIS SPACE

01232004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3383874

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EBERT, ARTHUR
7700 SUN ISLAND DR. #304
SAINT PETERSBURG, FL 33707
*15777 Boles Rd #22
Clearwater FL 33760*

**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

Arthur Ebert

4/14/04

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME EBERT, ARTHUR
STREET ADDRESS 7700 SUN ISLAND DR #304
CITY-ST-ZIP SOUTH PASADENA, FL 33707
*15777 Boles Rd #22
Clearwater FL 33760*

TITLE D
NAME EBERT, SHARON
STREET ADDRESS 7700 SUN ISLAND DR #304
CITY-ST-ZIP SOUTH PASADENA, FL 33707
*15777 Boles Rd
Clearwater FL 33760*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Arthur Ebert

Date

4/14/04

Daytime Phone #

727-458-9603