

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000084101

FILED
Feb 04, 2009
Secretary of State

Entity Name: PELICAN HARBOUR MANAGEMENT, INC.

Current Principal Place of Business:

500 NE 185 STREET
MIAMI, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

900 BAY DR PH 1
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 65-0709731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERSON LEVINSON, JUDI DR
900 BAY DR PH 1
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

BERSON LEVINSON, JUDITH DR
900 BAY DR PH 1
MIAMI BEACH, FL 33141 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: JUDITH BERSON-LEVINSON

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LEVINSON, STEVEN
Address: 900 BAY DRIVE PH 1
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VP () Delete
Name: BERSON LEVINSON, JUDI
Address: 900 BAY DRIVE PH 1
City-St-Zip: MIAMI BCH, FL 33141 US

Title: TREA () Delete
Name: LEVINSON, TAL
Address: 500 NE 185 STREET
City-St-Zip: MIAMI, FL 33179

Title: SECT () Delete
Name: BERSON-LEVINSON, JUDI
Address: 900 BAY DRIVE PH 1
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BERSON LEVINSON, JUDITH
Address: 900 BAY DRIVE PH 1
City-St-Zip: MIAMI BCH, FL 33141 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SECT (X) Change () Addition
Name: BERSON-LEVINSON, JUDITH
Address: 900 BAY DRIVE PH 1
City-St-Zip: MIAMI BEACH, FL 33141

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: JUDITH BERSON-LEVINSON

SECT

02/04/2009

Electronic Signature of Signing Officer or Director

Date