2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004
Secretary of State

DOCUMENT# P97000064990

Entity Name: PELICAN RESTAURANTS, INC.

Current Principal Place of Business:

1046 PINE RIDGE RD
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

1046 PINE RIDGE RD
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0775891 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEYLER, RANDALL J
196 SHARWOOD DRIVE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: SEYLER, RANDALL J
Address: 1046 PINE RIDGE RD
City-St-Zip: NAPLES, F 34108

Title: VPT ( ) Delete
Name: MURNANE, PATTY
Address: 4643 NAVASSA LANE
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete
Name: MILLER, MARC
Address: 180 VIKING WAY
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPT (X) Change ( ) Addition
Name: WALBERT, PATTY
Address: 2159 HARLANS RUN
City-St-Zip: NAPLES, FL 34105

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATTY A. WALBERT VPT 04/09/2004

Electronic Signature of Signing Officer or Director Date