

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045026

Entity Name: PELICAN REEF CLAMS, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

12350 GULF BLVD  
CEDAR KEY, FL 32625

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 626  
CEDAR KEY, FL 32625

## New Mailing Address:

FEI Number: 59-3579086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANDERS, FAYE CPA  
14342 SANHATCHEE ST  
CLERMONT, FL 34711 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: PTD ( ) Delete  
Name: MILSTEN, DAVID E  
Address: 1303 DOLPHIN STREET  
City-St-Zip: ORANGE PARK, FL 320733541

Title: SD ( ) Delete  
Name: MILSTEN, LILLIAN L  
Address: 1303 DOLPHIN STREET  
City-St-Zip: ORANGE PARK, FL 320733541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DAVID E MILSTEN

PTD

04/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date