Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90127 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secret my of State DIVISION OF CORPORATIONS

DOCUMENT # \$37750

1. Corporation Name

PELICAN HOMES CONSTRUCTION, INC.

					'E MINST BENEF NERS BENEF BENEF FORS
Principal Place	e of Business	Mailing Address			
110 SPORTSMA	N ROAD	110 SPORTSMAN ROAD			
UNIT C		UNIT C		DO NOT WRITE IN TH	JC CDACE
ROTONDA FL 33947		ROTONDA FL 33947		DO NOT WRITE IN THIS SPACE	
US		US		3. Date tr corporated or Qualifed	
				03/14/1991	
	ace of Business	2a. Mailing Address	0	4. FEI Number	Applied For
21 12734	SU. PENREOVE CE		PETT BROKE CI	<u>7 59-3055426 </u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		O, Contact of Cartes	Fee Recuired
City & S ate		City & State		6. Election Campaign Financing	\$5.00 May Be
23 - 1 4-1	LE SUZY TZ.	28 LAKE SUCE	1 tc.	Trust Fund Contribution	Added to Fees
	Country	Zip	Country	8. This corporation owes the current year	Intangible
24 3426	6 25 USA	29 24266 3	io USA	Personal Property Tax.	☐ Yes 〔☐No
2120	9. Name and Add ess of Current	Registered Agent		10. Name and Address of New Registere	d Agent
81 Name					
ANDERSON, RUDY				UST DIEROLF	
110 SPORTSMAN ROAD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	CD
UNIT 4			83	ST, ELLIE CON-	
ROTONDA FL 33947					
			84 City CA	UE SLIZY F	85 Zip Code
				CB SUICY F	L 342 48
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida St atu es Florida, Such channe was aut	ithe above-named comparison in the corporation in t	poration submits this statement for the purpose on's board of directors. I hereby accept the app	pointment as registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida State 86 the above-hained Cu potation such installed and the purpose of 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, Fix rida Statutes.					
			11/1/001	4-1	10-99
SIGNATOR	ERUST DIEROL Signature, typed or printed nar ie of registered agent	and title if applicable (NOT): T	tegistered Agent signature voqu re	a michitemisaamg)	
12.	OFFICERS AND		13	ADDITIC NS/CHANGES TO OFFICERS	
TITLE	PSTD	☐ DELETE	1.1 TITLE		Change Addition
NAME	DIEROLF, ERNST		1.2 NAME		
STREET ADDRESS	1300 ENTERPRISE DR., UNIT C		13 STREET ADDRESS		}
CITY-ST-ZIP	PORT CHARLOTTE FL		1.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE		Change Addition
NAME.	PETRAMALA, SHARON K.		2.2 NAME		
	1300 ENTERPRISE DR., UNIT C		2.3 STREET ADDRESS		
SI ADDRESS	1				
CITY-ST-ZIP	PORT CHARLOTTE FL	☐ DELETE	2 4 CITY-ST-ZIP		Change Addition
TITLE	V	□ DETE IE	3.1 TITLE		
NAME	DIEROLF, MARGARETHA		32 NAME		
STREET ADDRESS	1300 ENTERPRISE DR., UNIT C		3.3 STREET ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL		3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		□ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		_	5.2 NAME		
			5.3 STREET ADDRESS		
STREET ADDRES 3			5.4 CITY-ST-ZIP		
CITY-ST-ZIP			6.1 TITLE		Change Addition
TITLE		(*) Dereie	6.2 NAME		
NAME	İ		U.Z INAVIE		İ

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 or rify that the information indicated on this annual report or supplemental a nual 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, with all officer in the empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

STREET ADDRES