2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 726664

Entity Name: PELICAN POINT WEST, INC.

Current Principal Place of Business:

PELICAN POINT WEST INC 250 PARK SHORE DRIVE NAPLES, FL 34103

Current Mailing Address:

% FINANCIAL MANAGEMENT SERVICES P.O. BOX 11496 NAPLES, FL 34101-1496

FEI Number: 59-1731750 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLEHER, BILL 250 PARK SHORE DRIVE APT 702 NAPLES, FL 34103 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: BILL KELLEHER 05/30/2017

Electronic Signature of Registered Agent

Date

FILED May 30, 2017

Secretary of State CC9184202533

Officer/Director Detail:

Title DIR Title VPRES

Name CHIZEVER, SHELDON Name HAGSTROM, ANNIE

Address 250 PARK SHORE DR #201 Address 250 PARK SHORE DR #202

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title DIR Title SECR

Name HOLCER, TIMOTHY Name TAYLOR, KEN

Address 250 PARK SHORE DRIVE Address 250 PARK SHORE DR #401

City-State-Zip: NAPLES FL City-State-Zip: NAPLES FL 34103

Title PRES Title TRES

Name BILL, KELLEHER Name FITZGERALD, CHRISTINA P

Address 250 PARK SHORE DR #702 Address 250 PARK SHORE DR #603

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Electronic Signature of Signing Officer/Director Detail

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.