

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768432

Entity Name: PELICAN POINT OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1090 LANGLEY AVENUE
PENSACOLA, FL 32504**Current Mailing Address:**1090 LANGLEY AVENUE
PENSACOLA, FL 32504**FEI Number: 59-0193920****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BESCH, PEGGY ANN
1090 LANGLEY AVENUE
PENSACOLA, FL 32504 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|--------------------|
| Title | P |
| Name | HESTER, KEN |
| Address | P O BOX 34320 |
| City-State-Zip: | PENSACOLA FL 32507 |

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|-----------------|--------------------|
| Title | VP |
| Name | WILSON, GLEN |
| Address | 1363 LUCERNE DRIVE |
| City-State-Zip: | MOBILE AL |

| | |
|-----------------|---------------------|
| Title | MGR |
| Name | BESCH, PEGGY |
| Address | 1090 LANGLEY AVENUE |
| City-State-Zip: | PENSACOLA FL 32504 |

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|-----------------|-----------------------|
| Title | BOARD MEMBER |
| Name | GAY, DON |
| Address | 14737 PERDIDO KEY DR. |
| City-State-Zip: | PENSACOLA FL 32507 |

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|-----------------|--------------------|
| Title | BOARD MEMBER |
| Name | MCLEOD, EVELYN |
| Address | 6700 PENTON STREET |
| City-State-Zip: | PENSACOLA FL |

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|-----------------|------------------|
| Title | BM |
| Name | WELCH, JOHN T |
| Address | 5636 TREVINO DR. |
| City-State-Zip: | MILTON FL 32570 |

| | |
|-----------------|-----------------------|
| Title | BOARD MEMBER |
| Name | GRAU, MARK |
| Address | 122 LAKEWOOD PL |
| City-State-Zip: | BOSSIER CITY LA 71111 |

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.

SIGNATURE: PEGGY ANN BESCH**OFFICER/BOARD
MEMBER****03/11/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date