2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2014
Secretary of State
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Entity Name: PELICAN WALK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6905 THOMAS DR
PANAMA CITY BCH., FL 32408-6164

Current Mailing Address:

6905 THOMAS DR
PANAMA CITY BCH., FL 32408-6164

FEI Number: 59-2294360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J
427 MCKENZIE AVENUE
PANAMA CITY, FL 32401 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	S
Name	PATE, CRAIG
Address	1305 FORK CREEK TRAIL
City-State-Zip:	DECATUR GA 30033

Title	P
Name	GRANT, JAMES
Address	1254 WESTGATE PARKWAY
City-State-Zip:	DOTHAN AL 36303

Title	D
Name	EDWARDS, WARD
Address	PO BOX 2160
City-State-Zip:	BUTLER GA 31006-2160

Title	DIRECTOR
Name	SCHENCK, PHIL
Address	114 PALM CROSSING BLVD
City-State-Zip:	PANAMA CITY BEACH FL 32408

Title	TRES
Name	HICKEY, EDWARD
Address	6905 THOMAS D
City-State-Zip:	PANAMA CITY FL 32408

Title	D
Name	HATCHER, KENNETH
Address	6905 THOMAS DRIVE UNIT 801
City-State-Zip:	PANAMA CITY BEACH FL 32408

Title	D
Name	KENT, JIMMY
Address	161 PALM GROVE BOULEVARD
City-State-Zip:	PANAMA CITY BEACH FL 32408

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: EDWARD HICKEY MANAGER 01/13/2014

Electronic Signature of Signing Officer/Director Detail — Date