2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2024
Secretary of State
4781991504CC

DOCUMENT# N07000010589

Entity Name: PELICAN POINTE WOMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

1291 TUSCANY BLVD.
VENICE, FL 34292

Current Mailing Address:

1291 TUSCANY BLVD.
VENICE, FL 34292 US

FEI Number: 26-1352141

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTANA, DENISE
1291 TUSCANY BLVD.
VENICE, FL 34292 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: DENISE MONTANA 02/05/2024

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	MARY, MCKAY
Address	469 FAIRWAY ISLES DR.
City-State-Zip:	VENICE FL 34285

Title	SECRETARY
Name	SANTOIANNI, DENISE
Address	882 MACAW CIRCLE
City-State-Zip:	VENICE FL 34285

Title	DIRECTOR
Name	FOWLER, JAN
Address	1253 HIGHLAND GREENS DR.
City-State-Zip:	VENICE FL 34285

Title	DIRECTOR
Name	SANTOIANNI, DIANE
Address	882 MACAW CIRCLE
City-State-Zip:	VENICE FL 34285

Title	TREASURER
Name	MONTANA, DENISE
Address	1291 TUSCANY BLVD.
City-State-Zip:	VENICE FL 34292

Title	DIRECTOR
Name	DOLEMBO, SUSAN
Address	821 TROPEZ LANE
City-State-Zip:	VENICE FL 34292

Title	DIRECTOR
Name	SELBERG, JULIE
Address	1799 SAN SILVESTRO DR.
City-State-Zip:	VENICE FL 34285

Title	DIRECTOR
Name	CHAPMAN, SHARON
Address	1925 SAN SILVESTRO DRIVE
City-State-Zip:	VENICE FL 34285

Continues on page 2

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: DENISE MONTANA TREASURER 02/05/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STOVALL, BELINDA
Address	1935 SAN SILVESTRO DR.
City-State-Zip:	VENICE FL 34285

Title	VP
Name	HANKARD, BRENDA
Address	1966 SAN SILVESTRO DR.
City-State-Zip:	VENICE FL 34285