2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State
03-30-2006 90019 004 ****70.00

DOCUMENT # 739955

1. Entity Name
ST. GEORGE PLANTATION OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1712 MAGNOLIA RD. ST GEORGE ISLAND, FL 32328 US	1712 MAGNOLIA RD. ST GEORGE ISLAND, FL 32328 US

03242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2152461 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NEWMAN, RAYMOND F JR
348 MIRACLE STRIP PKWY SW SUITE 7
FORT WALTON BEACH, FL 32548

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CULBERTSON, RITA 1943 INDIAN HARBOR RD ST GEORGE ISLAND, FL 32328	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CROFTON, RUSSELL PO BOX 105 EASTPOINT, FL 32328	☒ Delete	VPD TAYLOR, LARRY P.O. BOX 306 PANAMA CITY, FL 32402	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TAYLOR, LARRY PO BOX 306 PANAMA CITY, FL 32402	☐ Delete	SD HARRIS, CECILIA 1940 NAUTILUS ROAD ST. GEORGE ISLAND, FL 32328	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SEWELL, LEE 38 MUSCOGEE AVE NW ATLANTA, GA 30305	☒ Delete	TD RAMEY, RICHARD 453 CHEYENNE ROAD COLUMBUS, GA 31904	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DRIVER, PAT 502 HOLLY HILL RD LOOKOUT MOUNTAIN, TN 37350	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAMEY, RICHARD 453 CHEYENNE ROAD COLUMBUS, GA 31904	☐ Delete	D ROBERT MCMILLAN 2988 HAMPTON COVE WAY HAMPTON COVE AL 35763	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kate Culbertson 3-25-06 850 927 2312
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #