

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742043

FILED
Feb 12, 2010
Secretary of State

Entity Name: PLANTATION-BY-THE-SEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

87465 OLD HIGHWAY
ATTN: OFFICE
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

87465 OLD HIGHWAY
ATTN: OFFICE
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 59-1886607 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ODOM, JOANNE
87465 OLD HWY #211
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: ODOM, JOANNE
Address: 87465 OLD HWY #211
City-St-Zip: ISLAMORADA, FL 33036

Title: T
Name: MORELLI, LOU
Address: 2551 HAVEN AVE
City-St-Zip: OCEAN CITY, NJ 08226

Title: VP
Name: HEARFIELD, RICHARD
Address: 87465 OLD HWY # 242
City-St-Zip: ISLAMORADA, FL 33036

Title: S
Name: BOSS, LOU
Address: 87465 OLD HWY #102
City-St-Zip: ISLAMORADA, FL 33036

Title: D
Name: PATTERSON, MIKE
Address: 87465 OLD HWY # 213
City-St-Zip: ISLAMORADA, FL 33036

Title: D
Name: MC KENNON, ANGUS
Address: 87465 OLD HWY # 201
City-St-Zip: ISLAMORADA, FL 33036

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: JOANNE ODOM

PRES

02/12/2010

Electronic Signature of Signing Officer or Director

Date