


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90001 017 \*\*\*\*61.25

**DOCUMENT # 749515**

1. Entity Name  
 PLANTATION RIVERWOOD ASSOCIATION, INC.




Principal Place of Business  
 2177 SE OCEAN  
 STUART, FL 34996

Mailing Address  
 2177 SE OCEAN  
 STUART, FL 34996

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country



01162008 Chg-NP CR2E037 (12/06)

4. FEI Number  
 59-2021422

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

KERT, LARRAINE H  
 1111 SE FEDERAL HWY.  
 SUITE 100  
 STUART, FL 34994

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, 2008**

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	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PEARD, FRANK		NAME	<i>COSTELLA, Joseph</i>	
STREET ADDRESS	291 NE EDGEWATER DR		STREET ADDRESS	<i>234 NE EDGEWATER DR.</i>	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	<i>STUART, FL 34996</i>	
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MELANGTON, JOHN		NAME		
STREET ADDRESS	264 NE EDGEWATER DR.		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEILMAN, KARL		NAME	<i>COUCH, EARLE</i>	
STREET ADDRESS	287 NE EDGEWATER DR.		STREET ADDRESS	<i>289 NE EDGEWATER DR.</i>	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	<i>STUART, FL 34996</i>	
TITLE	DS	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATRICK, CHARLE S		NAME	<i>VPS</i>	
STREET ADDRESS	278 NE EDGEWATER		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASTROGIOVANNI, ANTHONY		NAME	<i>JD</i>	
STREET ADDRESS	233 NE EDGEWATER DRIVE		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AGNO, LYNN		NAME		
STREET ADDRESS	233 NE EDGEWATERDR.		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP		

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:  **3/27/08** **772-334-2307**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40054010

REILLY MADELINE  
258 NE EDGEWATER Dr.  
STUART, FL 34996

# 749515

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