

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000070

FILED
Feb 15, 2009
Secretary of State

Entity Name: BARTRAM PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-3693699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRYAN
SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 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: D () Delete
Name: SUTER, JOHN
Address: 509 DANDELION DR
City-St-Zip: ST JOHNS, FL 32259

Title: T () Delete
Name: KEENER, CRYSTAL
Address: 505 S BRIDGE CREEK DR
City-St-Zip: ST JOHNS, FL 32259

Title: D () Delete
Name: CARRAWAY, DENISE
Address: 365 SUMMERSET DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: PD () Delete
Name: GOLON, WAYNE
Address: 461 SUMMERSET DR
City-St-Zip: ST JOHNS, FL 32259

Title: VP () Delete
Name: EDWARDS, RICHARD
Address: 394 SUMMERSET DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: LUMLEY, THOMAS
Address: 708 SPRING HAVEN DR
City-St-Zip: ST JOHNS, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: BURNS, SAMUEL
Address: 517 SOUTH BRIDGE CREEK DR
City-St-Zip: ST JOHNS, FL 32259

Title: D (X) Change () Addition
Name: KEENER, CRYSTAL
Address: 505 SOUTH BRIDGE CREEK DR
City-St-Zip: ST JOHNS, FL 32259

Title: VP (X) Change () Addition
Name: CARRAWAY, DENISE
Address: 365 SUMMERSET DR
City-St-Zip: ST JOHNS, FL 32259

Title: P (X) Change () Addition
Name: GOLON, WAYNE
Address: 461 SUMMERSET DR
City-St-Zip: ST JOHNS, FL 32259

Title: S (X) Change () Addition
Name: FICHTE, SUSAN
Address: 561 SOUTH BRIDGE CREEK DR
City-St-Zip: ST. JOHNS, FL 32259

Title: D (X) Change () Addition
Name: FROATS, JAMES
Address: 410 SUMMERSET DR.
City-St-Zip: ST JOHNS, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SUSAN FICHTE

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02/15/2009

Electronic Signature of Signing Officer or Director

_____ Date