

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10530

FILED
Feb 05, 2007
Secretary of State

Entity Name: HALIFAX PLANTATION PHASE I HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 US

New Principal Place of Business:

Current Mailing Address:

1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 US

New Mailing Address:

FEI Number: 59-2660557 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARKIN, MICHLE NELSON
1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 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: DS () Delete
Name: MEDINA, PRISCILLA
Address: 1464 PEOS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: DP () Delete
Name: MCKOEWN, JACK
Address: 4009 DAKOTA CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: DVP () Delete
Name: TRIAS, WILMA
Address: 3919 HANO COURT
City-St-Zip: ORMOND BEACH, FL

Title: DT () Delete
Name: MOTTO, GREG
Address: 3929 KIOWA LN
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: CORBETT, JACK
Address: 3931 HANO CT
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: KRIVANEK, CHARLES
Address: 4000 ACOMA
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: BENEDICT, EDWARD
Address: 1455 PECAS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: DVP (X) Change () Addition
Name: GIULIANO, JOSEPH
Address: 4061 ACOMA DRIVE
City-St-Zip: ORMOND BEACH, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ED BENEDICT

PRES

02/05/2007

Electronic Signature of Signing Officer or Director

Date