

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2006
Secretary of State**

DOCUMENT# N36082

Entity Name: DEBARY PLANTATION COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

107 N. LINE DR.
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

107 N. LINE DR.
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-2946179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA
107 N. LINE DR.
APOPKA, FL 32703 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: PD () Delete
Name: ASBURY, WILLIAM
Address: 217 BIRDIEWOOD CT.
City-St-Zip: DEBARY, FL 32713

Title: VD () Delete
Name: PISANI, ED
Address: 200 EAGLE ESTATES DR.
City-St-Zip: DEBARY, FL 32713

Title: SD () Delete
Name: MASSART, RITA
Address: 228 HAMMOCK OAK CIRCLE
City-St-Zip: DEBARY, FL 32713

Title: TD () Delete
Name: JENKINS, PHIL
Address: 137 HAMMOCK OAK CIRCLE
City-St-Zip: DEBARY, FL 32713 US

Title: D () Delete
Name: WEBER, GARY
Address: 416 FENWICK CT.
City-St-Zip: DEBARY, FL 32713 US

Title: D () Delete
Name: MESMER, BILL
Address: 436 HIGHTOWER DR.
City-St-Zip: DEBARY, FL 32713 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PISANI, ED
Address: 200 EAGLE ESTATES DRIVE
City-St-Zip: DEBARY, FL 32713

Title: VD (X) Change () Addition
Name: KAISER, JERRY
Address: 288 HAMMOCK OAK CIRCLE
City-St-Zip: DEBARY, FL 32713

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

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

Title: D (X) Change () Addition
Name: HARWELL, JACK
Address: 213 HAZELTINE DR.
City-St-Zip: DEBARY, FL 32713 US

Title: D (X) Change () Addition
Name: WARNER, TOM
Address: 508 QUAIL VIEW COURT
City-St-Zip: DEBARY, FL 32713 US

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 PISANI

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date