

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90120 034 ****70.00

DOCUMENT # N02000004838

1. Entity Name
PALM BEACH PLANTATION HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**% TOWN & COUNTRY BUILDES INC
2295 CORPORATE BLVD., N.W. SUITE 140
BOCA RATON FL 33431**

Mailing Address
**% TOWN & COUNTRY BUILDES INC
2295 CORPORATE BLVD., N.W. SUITE 140
BOCA RATON FL 33431**

2. Principal Place of Business
**% A&N MGMT. Inc
Suite, Apt. #, etc.
6413 CONGRESS AVE
City & State
SUITE 220 BOCA RATON, FL**

3. Mailing Address
**% A&N MGMT. Inc
Suite, Apt. #, etc.
6413 CONGRESS AVE
City & State
SUITE 220 BOCA RATON, FL**

4. FEI Number
08-0522097

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



☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**KELLY, TIMOTHY R
2295 CORPORATE BLVD., N.W.
EXECUTIVE COURT ONE, SUITE 140
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent
**RONALD PLATT ESQ.
Street Address (P.O. Box Number is Not Acceptable)
170 N.W. SPANISH RIVER BLVD
City
BOCA RATON FL Zip Code
33431**

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 **RONALD L. PLATT, ATTY.** DATE **2/18/03**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PD KELLY, TIMOTHY R 2295 CORPORATE BLVD., NW SUITE 140 BOCA RATON FL 33431	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LILLER, STEPHEN B 2295 CORPORATE BLVD., NW SUITE 140 BOCA RATON FL 33431	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PLATT, RONALD L 2295 CORPORATE BLVD., NW SUITE 140 BOCA RATON FL 33431	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Timothy R. Kelly, President** DATE **2/17/03** **561-8930029**

CR2E037 (10/02)