

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008220

Entity Name: CLASSICS PLANTATION ESTATES HOMEOWNERS ASSOCIATION, INC.**FILED**
May 27, 2015
Secretary of State
CC4049691243**Current Principal Place of Business:**DORRILL MANAGEMENT GROUP
5672 STRAND COURT, SUITE 1
NAPLES, FL 34110**Current Mailing Address:**DORRILL MANAGEMENT GROUP
5672 STRAND COURT, SUITE 1
NAPLES, FL 34110 US**FEI Number: 59-3756814****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DORRILL, W. NEIL
5672 STRAND COURT
SUITE 1
NAPLES, FL 34110 US*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**Officer/Director Detail :**

Title	P
Name	KELLY, MIKE
Address	5672 STRAND COURT, SUITE 1
City-State-Zip:	NAPLES FL 34110

Title	DIRECTOR
Name	O'MALLEY, MAUREEN
Address	5672 STRAND COURT, SUITE 1
City-State-Zip:	NAPLES FL 34110

Title	AST
Name	DORRILL, NEIL
Address	5672 STRAND COURT, SUITE 1
City-State-Zip:	NAPLES FL 34110

Title	TREASURER
Name	PORTER, TERRY
Address	7842 MARTINIQUE TERRACE
City-State-Zip:	NAPLES FL 34113

Title	VP
Name	PARROTT, JAMES
Address	DORRILL MANAGEMENT GROUP 5672 STRAND COURT, SUITE 1
City-State-Zip:	NAPLES FL 34110

Title	SECRETARY
Name	DESLAURIES, KATHLEEN
Address	DORRILL MANAGEMENT GROUP 5672 STRAND COURT, SUITE 1
City-State-Zip:	NAPLES FL 34110

I hereby 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 all other like empowered.

SIGNATURE: NEIL DORRILL**ASSISTANT SECRETARY 05/27/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date