

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000002445

**Entity Name:** NEW PLANTATION POINT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

103 PLANTATION POINT DRIVE  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256 US

**FEI Number:** 13-4211306

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JACKSON LAW GROUP, L.L.M., P.A.  
1301 PLANTATION ISLAND DRIVE  
SUITE 304  
ST. AUGUSTINE, FL 32080 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            PRESIDENT  
Name            DUNN, PATRICIA  
Address        7400 BAYMEADOWS WAY  
                 SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title            TREASURER  
Name            HUMMEL, ANTHONY  
Address        7400 BAYMEADOWS WAY  
                 SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title            SECRETARY  
Name            MONTGOMERY, LINDA  
Address        7400 BAYMEADOWS WAY  
                 SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

*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:** PATRICIA DUNN

**PRESIDENT**

**02/03/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date