## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004766

Entity Name: THE PLANTATION IN PINELLAS PARK, INC.

**FILED** Mar 13, 2023 **Secretary of State** 4494740810CC

**Current Principal Place of Business:** 

C/O ENSUVI PROPERTY MANAGEMENT INC. PO BOX 633

ELFERS, FL 34680

**Current Mailing Address:** 

C/O ENSUVI PROPERTY MANAGEMENT INC.

PO BOX 633

ELFERS, FL 34680 US

FEI Number: 20-2817895 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ENSUVI PROPERTY MANAGEMENT INC. C/O ENSUVI PROPERTY MANAGEMENT INC.

PO BOX 633

Address

ELFERS, FL 34680 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: MURRAY CHARLES MCGILVEARY 03/13/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

Name GOMES, JULIANA Name AZEVEDO, SHIRLEY

C/O ENSUVI PROPERTY C/O ENSUVI PROPERTY Address Address

MANAGEMENT INC. MANAGEMENT INC.

**PO BOX 633** PO BOX 633

ELFERS FL 34680 ELFERS FL 34680 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **OTHER** 

DAVIS, TIMOTHY **ENSUVI PROPERTY MANAGEMENT** Name Name INC.

C/O ENSUVI PROPERTY

C/O ENSUVI PROPERTY Address MANAGEMENT INC.

MANAGEMENT INC. PO BOX 633

PO BOX 633 ELFERS FL 34680

City-State-Zip: ELFERS FL 34680 City-State-Zip:

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.

03/13/2023 SIGNATURE: MURRAY CHARLES MCGILVEARY **MANAGER**