

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000007817

**Entity Name:** PLANTATION OF CLEARWATER HOMEOWNERS' ASSOCIATION, INC.**FILED**  
**Mar 20, 2019**  
**Secretary of State**  
**2780299531CC****Current Principal Place of Business:**200 CENTRAL AVENUE  
SUITE 1210  
ST. PETERSBURG, FL 33701**Current Mailing Address:**200 CENTRAL AVENUE  
SUITE 1210  
ST. PETERSBURG, FL 33701 US**FEI Number: 46-4198892****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MALLER, KAREN E. ESQ.  
200 CENTRAL AVENUE  
SUITE 1210  
ST. PETERSBURG, FL 33701 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: KAREN E. MALLER****03/20/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                  |
|-----------------|----------------------------------|
| Title           | PRESIDENT                        |
| Name            | MENNEN, LEONARD DR.              |
| Address         | 200 CENTRAL AVENUE<br>SUITE 1210 |
| City-State-Zip: | ST. PETERSBURG FL 33701          |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | VP                               |
| Name            | WALTHERS, WILLIAM E.             |
| Address         | 200 CENTRAL AVENUE<br>SUITE 1210 |
| City-State-Zip: | ST. PETERSBURG FL 33701          |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | SECRETARY, TREASURER             |
| Name            | BAXTER, HUGH                     |
| Address         | 200 CENTRAL AVENUE<br>SUITE 1210 |
| City-State-Zip: | ST. PETERSBURG FL 33701          |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | DIRECTOR                         |
| Name            | GUTHRIE, DAN                     |
| Address         | 200 CENTRAL AVENUE<br>SUITE 1210 |
| City-State-Zip: | ST. PETERSBURG FL 33701          |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | DIRECTOR                         |
| Name            | HADI, FAZAL K.                   |
| Address         | 200 CENTRAL AVENUE<br>SUITE 1210 |
| City-State-Zip: | ST. PETERSBURG FL 33701          |

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: DR. LEONARD MENNEN****PRESIDENT****03/20/2019**

Electronic Signature of Signing Officer/Director Detail

Date