

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26675

**FILED**  
**Apr 05, 2013**  
**Secretary of State**  
**CC4454459259**

**Entity Name:** THE PLANTATION COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business:**

500 ROCKLEY BLVD.  
VENICE, FL 34293

**Current Mailing Address:**

500 ROCKLEY BLVD.  
VENICE, FL 34293

**FEI Number:** 65-0056930

**Certificate of Status Desired:** Yes

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

WILLIAMS, LEE  
500 ROCKLEY BOULEVARD  
VENICE, FL 34293 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:** LEE WILLIAMS

04/05/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name WILLIAMS, LEE  
Address 500 ROCKLEY BLVD.  
City-State-Zip: VENICE FL 34293

Title VD  
Name THUER, JUDITH  
Address 500 ROCKLEY BLVD  
City-State-Zip: VENICE FL 34293

Title VD  
Name AMBROSE, MARSHA  
Address 500 ROCKLEY BLVD  
City-State-Zip: VENICE FL 34293

Title VD  
Name KRASKA, JOANNE  
Address 500 ROCKLEY BLVD.  
City-State-Zip: VENICE FL 34293

Title VD, SECRETARY  
Name WILLIAMSON, TERRY  
Address 500 ROCKLEY BLVD.  
City-State-Zip: VENICE FL 34293

Title VP  
Name HALKYARD, ROBERT  
Address 500 ROCKLEY BLVD.  
City-State-Zip: VENICE FL 34293

*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:** LEE WILLIAMS

**PRESIDENT**

04/05/2013

Electronic Signature of Signing Officer/Director Detail

Date