

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32499

**FILED**  
**Mar 11, 2020**  
**Secretary of State**  
**2125352591CC**

**Entity Name:** HIBERNIA PLANTATION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

767 BLANDING BLVD., SUITE 112  
ORANGE PARK, FL 32065

**Current Mailing Address:**

767 BLANDING BLVD., SUITE 112  
ORANGE PARK, FL 32065 US

**FEI Number: 59-2975342**

**Certificate of Status Desired: No**

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

WICKHAM, PHILLIP  
767 BLANDING BLVD., SUITE 112  
ORANGE PARK, FL 32065 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           DIRECTOR  
Name           DALE, SMITH  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           DIRECTOR  
Name           JANET, FOX  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           PRESIDENT  
Name           LARIMORE, EMORY  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           VP  
Name           WANKE, RUSS  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           SECRETARY  
Name           RICHARD, SUTLIFF  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           TREASURER  
Name           MERRITT, SUSAN  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

Title           DIRECTOR  
Name           BILLINGS, KEITH  
Address        767 BLANDING BLVD., SUITE 112  
City-State-Zip: ORANGE PARK FL 32065

*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: EMORY LARIMORE**

**PRESIDENT**

**03/11/2020**

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

\_\_\_\_\_  
Date