#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36082

Entity Name: DEBARY PLANTATION COMMUNITY ASSOCIATION, INC.

**FILED** Apr 24, 2024 Secretary of State 9975770383CC

## **Current Principal Place of Business:**

766 N. SUN DRIVE **SUITE 2000** 

LAKE MARY, FL 32746

### **Current Mailing Address:**

766 N. SUN DRIVE **SUITE 2000** 

LAKE MARY, FL 32746 US

FEI Number: 59-2946179 Certificate of Status Desired: No

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

**BONO AND ASSOCIATES** 766 N. SUN DRIVE **SUITE 2000** 

LAKE MARY, FL 32746 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: MICHAEL L BONO 04/24/2024

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title DIRECTOR Title DIRECTOR Name MORRIS, GARY Name JENKINS, PHIL 766 N. SUN DRIVE 766 N. SUN DRIVE Address Address **SUITE 2000 SUITE 2000** 

LAKE MARY FL 32746 City-State-Zip: LAKE MARY FL 32746

City-State-Zip:

Title **PRESIDENT** Title VΡ

Name ERSSON, CHRISTOPHER Name FLOWERS, JOAN Address 766 N. SUN DRIVE Address 766 N. SUN DRIVE **SUITE 2000 SUITE 2000** 

City-State-Zip: LAKE MARY FL 32746 City-State-Zip: LAKE MARY FL 32746

Title **TREASURER** Title **SECRETARY** 

**BILLINGS, THOMAS** SAN FANANDRE, JEANNE Name Name

766 N. SUN DRIVE 766 N. SUN DRIVE Address Address

**SUITE 2000 SUITE 2000** 

City-State-Zip: LAKE MARY FL 32746 City-State-Zip: LAKE MARY FL 32746

**DIRECTOR** Title **DIRECTOR** Title

Name GRAY, JOAN Name OCHAB. CATHERINE Address 766 N. SUN DRIVE Address 766 N. SUN DRIVE

> **SUITE 2000 SUITE 2000**

LAKE MARY FL 32746 LAKE MARY FL 32746 City-State-Zip: City-State-Zip:

#### Continues on page 2

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.

04/24/2024 SIGNATURE: CHRISTOPHER ERSSON **PRESIDENT** 

# Officer/Director Detail Continued:

Title DIRECTOR

Name MANNINO, CATHERINE

766 N. SUN DRIVE SUITE 2000 Address

City-State-Zip: LAKE MARY FL 32746