

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36082

Entity Name: DEBARY PLANTATION COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

761 CIARA CREEK COVE
LONGWOOD, FL 32750

Current Mailing Address:

761 CIARA CREEK COVE
LONGWOOD, FL 32750 US

FEI Number: 59-2946179

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BONO AND ASSOCIATES
761 CIARA CREEK COVE
LONGWOOD, FL 32750 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

03/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SOUERS, PHILLIP
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR
Name JENKINS, PHIL
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title PRESIDENT
Name MANNINO, CATHERINE
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title TREASURER
Name GALLAGHER, AUDREY
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title SECRETARY
Name WALTON, DENISE
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title D
Name KAVITCH, WILLIAM
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title D
Name BONNETT, PREBBLE
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

Title D
Name MORRIS, GARY
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750

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.

SIGNATURE: CATHERINE MANNINO

PRESIDENT

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name REELEY, DIANA
Address 761 CIARA CREEK COVE
City-State-Zip: LONGWOOD FL 32750