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:	TOM KUBIK

1

Electronic Signature of Signing Officer/Director Detail

# 500 ROCKLEY BLVD. VENICE, FL 34293

**Current Principal Place of Business:** 

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: PLANTATION GOLF AND COUNTRY CLUB, INC.

## **Current Mailing Address:**

500 ROCKLEY BLVD. VENICE, FL 34293

DOCUMENT# N44015

#### FEI Number: 65-0273104

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

KUBIK, TOM 500 ROCKLEY BLVD 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.

Date

Certificate of Status Desired: No

### FILED Apr 04, 2018 Secretary of State CC1557923050

04/04/2018

PRESIDENT