

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

DOCUMENT# N94000005872

**FILED  
Jan 16, 2013  
Secretary of State  
CC3963928095**

**Entity Name:** HALIFAX PLANTATION PHASES II & III HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3500 MERRITT DRIVE  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

3500 MERRITT DRIVE  
ORMOND BEACH, FL 32174

**FEI Number: 59-3301171**

**Certificate of Status Desired: No**

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

TUMBLESON, J. DOYLE  
150 S. PALMETTO AVENUE  
DAYTONA BEACH, FL 32114 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 VTD  
Name CANAVAN, PAM  
Address 3500 MERRITT DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

Title PD  
Name UANINO, ANTHONY  
Address 3500 MERRITT DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

Title AS  
Name NEEDHAM, JONATHAN  
Address 3400 HALIFAX CLUB HOUSE DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

Title S  
Name GRAHAM, ANDREA  
Address 3400 HALIFAX CLUB HOUSE DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR  
Name BODENRADER, PEGGY  
Address 3500 MERRITT DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

*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: ANTHONY UANINO**

**PRESIDENT**

**01/16/2013**

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

\_\_\_\_\_  
Date