

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002551

**FILED**  
**Mar 24, 2015**  
**Secretary of State**  
**CC4659231383**

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

**Current Principal Place of Business:**

12232 LYNDELL PLANTATION DR  
PANAMA CITY BEACH, FL 32407

**Current Mailing Address:**

P.O. BOX 18911  
PANAMA CITY, FL 32417

**FEI Number: 59-3584138**

**Certificate of Status Desired: No**

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

LYNDELL PLANTATION HOMEOWNERS ASSOCIATION  
12232 LYNDELL PLANTATION DR  
PANAMA CITY BEACH, FL 32407 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: KAREN BRANHAM**

**03/24/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name HAIGHT, DAVID M  
Address 12232 LYNDELL PLANTATION DR  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title D  
Name THOMAS, KERN  
Address P.O. BOX 18911  
City-State-Zip: PANAMA CITY FL 32417

Title VP  
Name SHAW, RICHARD  
Address P.O. BOX 18911  
City-State-Zip: PANAMA CITY FL 32417

Title SECRETARY  
Name STONECYPHER, RON  
Address P.O. BOX 18911  
City-State-Zip: PANAMA CITY FL 32417

Title TREASURER  
Name BRANHAM, KAREN  
Address P.O. BOX 18911  
City-State-Zip: PANAMA CITY FL 32417

*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: KAREN BRANHAM**

**TREASURER**

**03/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date