

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90279 034 ****61.25

DOCUMENT # 712410 1. Entity Name PLYMOUTH HARBOR RESIDENTS ASSN., INC.					
Principal Place of Business 700 JOHN RINGLING BOULEVARD SARASOTA, FL 34236			Mailing Address 700 JOHN RINGLING BOULEVARD SARASOTA, FL 34236		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number NOT APPLICABLE				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOPE, MITCHELL 700 JOHN RINGLING BLVD, APT E208 SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name WILBUR LEGG Street Address (P.O. Box Number is Not Acceptable) 700 JOHN RINGLING BLVD, E-310 City SARASOTA FL Zip Code 34236		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Wilbur S. Legg</u> DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COMPTON, NORMA 700 JOHN RINGLING BLVD. SARASOTA, FL 34236	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WILLIAM SEIBERLING 700 JOHN RINGLING BLVD. SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BERKLEY, JOSEPH 700 JOHN RINGLING BLVD SARASOTA, FL 34236	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARY ALYN 700 JOHN RINGLING BLVD. SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MITCHELL, HOPE 700 JOHN RINGLING BLVD SARASOTA, FL 34236	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY-TREASURER PRISCILLA HEINDEL 700 JOHN RINGLING BLVD. SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD BRZICA, MOLLY 700 JOHN RINGLING BLVD. SARASOTA, FL 34236	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILBUR LEGG ASSOC. S-T WILBUR S. LEGG 700 JOHN RINGLING BLVD. SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Wilbur S. Legg</u> (WILBUR S. LEGG) <u>April 12, 2007</u> <u>941 361 7197</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					