

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State

0034163

DOCUMENT # 716931

1. Entity Name

THE PLANTATION ACRES HOME AND LAND OWNERS IMPROVEMENT ASSOCIATION, INC.



05-19-2003 90203 037 ****61.25

Principal Place of Business

**880 NW 116TH AVE
PLANTATION FL 33325**

Mailing Address

**9715 W BROWARD BLVD #100
PLANTATION FL 33324
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GEORGE, JOHN P.A.

315 SE 7TH ST

SUITE 200

FT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 | PD | <input type="checkbox"/> Delete |
| NAME | GEORGE, JOHN G | |
| STREET ADDRESS | 880 NW 116TH AVE | |
| CITY-ST-ZIP | PLANTATION FL 33325 | |
| TITLE | VPD | <input type="checkbox"/> Delete |
| NAME | PARENTE, EILEEN | |
| STREET ADDRESS | 1131 NW 118TH AVENUE | |
| CITY-ST-ZIP | PLANTATION FL 33323 | |
| TITLE | SD | <input checked="" type="checkbox"/> Delete |
| NAME | WINSLOW, LYDIA | |
| STREET ADDRESS | 11751 SW 1ST STREET | |
| CITY-ST-ZIP | PLANTATION FL 33325 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | ANTHONY E FENECH | |
| STREET ADDRESS | 1201 NW 118TH AVE | |
| CITY-ST-ZIP | PLANTATION FL 33323 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|------------------------------|--|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | DAVID HAWKINS | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | 3125 HIATUS RD. (SD) | |
| STREET ADDRESS | PLANTATION FL 33325 | |
| CITY-ST-ZIP | (ADDRESS CHANGE) | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 12290 NW 20CT. TREAS. | |
| STREET ADDRESS | PLANTATION FL 33323 | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

ANTHONY E FENECH (TREAS) 954-647-1937

CR2E037 (10/02)