

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765764

FILED  
Jun 23, 2009  
Secretary of State

**Entity Name:** PLANTATION BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

329 NE TRADEWIND LANE  
STUART, FL 34996 US

**New Principal Place of Business:**

**Current Mailing Address:**

329 NE TRADEWIND LANE  
STUART, FL 34996 US

**New Mailing Address:**

**FEI Number:** 59-2552214 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HILTON GRAND VACATIONS COMPANY, LLC  
5323 MILLENIA LAKES BLVD  
STE 400  
ORLANDO, FL 32839 US

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

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

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: MARTIN, CAROL  
Address: 12 MERRIMAC COURT  
City-St-Zip: CORAM, NY 11727

Title: D ( ) Delete  
Name: WOODS, KATHLEEN  
Address: 6106 SUMMIT STREET  
City-St-Zip: KANSAS CITY, MO 64113

Title: P ( ) Delete  
Name: SEARLEMAN, SANFORD  
Address: 43 LINCOLN AVENUE  
City-St-Zip: GLEN FALLS, NY 12801

Title: D ( ) Delete  
Name: BOBYACK, CHARLES  
Address: 365 HOOPER CREEK ROAD  
City-St-Zip: TRYON, NC 28782

Title: VP ( ) Delete  
Name: LEBLANC, KIRK  
Address: 1343 VALLEY GRASS DRIVE  
City-St-Zip: BROWNSBURG, IN 46112

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SANFORD SEARLEMAN

P

06/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date