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FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90209 006 \*\*\*158.75

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G65694

1. Corporation Name

PLANTATION COUNTRY REALTY, INC.

Principal Place of Business

~~1972 RAYMOND DIEHL RD.~~  
TALLAHASSEE FL 32308

Mailing Address

~~1972 RAYMOND DIEHL RD.~~  
TALLAHASSEE FL 32308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1983

4. FEI Number

59-2334692

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 3998 Bradfordville Road

Suite, Apt. #, etc.

22 Suite D

City & State

23 Tallahassee, FL

Zip

24 32308

Country

25 USA

2a. Mailing Address

26 3998 Bradfordville Road

Suite, Apt. #, etc.

27 Suite D

City & State

28 Tallahassee, FL

Zip

29 32308

Country

30 USA

9. Name and Address of Current Registered Agent

LAMB, MARION D., JR.

~~1972 RAYMOND DIEHL RD.~~

TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name Same

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

3998 Bradfordville Rd

83

Suite A

84 City

Tallahassee

FL

85 Zip Code

32308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (MARION D. LAMB, JR.) 3998 Bradfordville Rd (new street address only change)

1-8-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE

NAME LAMB, SARA H.

STREET ADDRESS ~~1972 RAYMOND DIEHL RD #D~~

CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ DELETE

NAME LAMB, SARA H.

STREET ADDRESS ~~1972 RAYMOND DIEHL RD #D~~

CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3998 Bradfordville Road

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3998 Bradfordville Road

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change  
(Address  
only)

☐ Addition

☒ Change  
(Address  
only)

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARA H. LAMB REQUIRED SARA H. LAMB

1-8-99

850-385-9340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)