

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L95929** (0)

1. Corporation Name

PLANTATION DEVELOPMENT GROUP, INC.



Principal Place of Business

**1234 S. BERMUDA AVENUE
KISSIMMEE FL 34741
US**

Mailing Address

**P.O. BOX 423267
KISSIMMEE FL 34742-3267
US**

2. Principal Place of Business

2a. Mailing Address

21 **4417 White Oak Circle**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Kissimmee, FL**

28

Zip

Country

Zip

Country

24 **34741**

25

U.S.A.

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/23/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3031155

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**MILES JR, R. STEPHEN
4305 NEPTUNE RD
ST CLOUD FL 34769**

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name and title of agent for the corporation

Signature, typed or printed name and title of agent for the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	PO	☐ DELETE
NAME	RICK W. TAYLOR	
STREET ADDRESS	4430 WHITE OAK CIRCLE	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	STD	☐ DELETE
NAME	ALBERT J. BRUNO	
STREET ADDRESS	15 W. LAKE DRIVE	
CITY-ST-ZIP	S BARRINGTON IL	
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	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	500001859315
3.3 STREET ADDRESS	-06/12/96--01022--007
3.4 CITY-ST-ZIP	***8.75
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	600001859316
4.3 STREET ADDRESS	-06/12/96--01022--008
4.4 CITY-ST-ZIP	***225.00
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or changes to or an addition to with an address.

SIGNATURE:

Rick Taylor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick Taylor

6/4/96

407-396-6678
Telephone Number

CR2E034 (12/95)