

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 25, 2009  
Secretary of State**

DOCUMENT# N00023

Entity Name: PLANTATION OAKS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

821 SE 3RD ST  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4192  
OCALA, FL 34478 US

**New Mailing Address:**

FEI Number: 59-2350661      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOHNSON, MARY C  
821 SE 3RD ST  
OCALA, FL 34471 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: TSD ( ) Delete  
Name: JOHNSON, MARY C.  
Address: 821 SE 3RD STREET  
City-St-Zip: Ocala, FL

Title: PD ( ) Delete  
Name: FEHR, NOELANI J  
Address: 825 SE 3RD ST  
City-St-Zip: Ocala, FL 34471

Title: VD ( ) Delete  
Name: HANKS, ELSIE D  
Address: 816 S E 2ND STREET  
City-St-Zip: Ocala, FL 34471

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

Title: TSD (X) Change ( ) Addition  
Name: JOHNSON, MARY C.  
Address: 821 SE 3RD STREET  
City-St-Zip: Ocala, FL 34471

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: MARY C. JOHNSON

TSD

04/25/2009

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

\_\_\_\_\_  
Date