
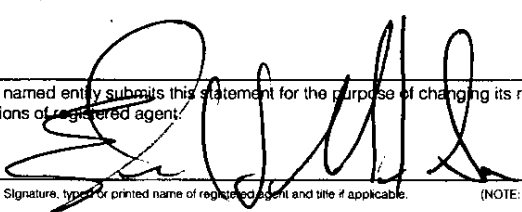
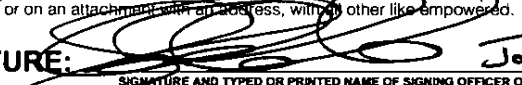


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90379 046 ****61.25

DOCUMENT # N01000006851					
1. Entity Name PLANTATION PRESERVE HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 11511 PLANTATION PRESERVE CIR FORT MYERS, FL 33912			Mailing Address 14020 PALM BEACH BLVD FORT MYERS, FL 33905		
2. Principal Place of Business		3. Mailing Address 3915 Lee Blvd			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Lehigh Acres FL			
Zip	Country	Zip 33971	Country	4. FEI Number 65-1142449	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MAROTI, EDWARD L SR 14020 PALM BEACH BLVD FORT MYERS, FL 33905			Name EDWARD L. MAROTI SR		
			Street Address (P.O. Box Number is Not Acceptable)		
			3915 Lee Blvd		
			City Lehigh Acres		
			State FL		
			Zip Code 33971		
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 					
(NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 P.	NAME LOWMAN, CHRIS		<input type="checkbox"/> Delete	TITLE D.O.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 11578 PLANTATION PRESERVE CIR S.	CITY-ST-ZIP FORT MYERS, FL 33912			STREET ADDRESS	
TITLE DVT	NAME CANDELORE, JOSEPH		<input type="checkbox"/> Delete	TITLE PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6531 PLANTATION PRESERVE CIR.	CITY-ST-ZIP FORT MYERS, FL 33912			STREET ADDRESS	
TITLE DS	NAME DEBLOIS, EDMOND		<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 11673 PLANTATION PRESERVE CIR.	CITY-ST-ZIP FORT MYERS, FL 33912			STREET ADDRESS	
TITLE V	NAME ESPOSITO, MARIA		<input checked="" type="checkbox"/> Delete	TITLE PRES.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 11566 PLANTATION PRESERVE CIR. S	CITY-ST-ZIP FORT MYERS, FL 33912			STREET ADDRESS 11634 PLANTATION PRESERVE CIR, S.	
TITLE	NAME		<input type="checkbox"/> Delete	STREET ADDRESS FT. MYERS, FL. 33912	
STREET ADDRESS	CITY-ST-ZIP			TITLE V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	NAME RICHARD RACZKA			STREET ADDRESS 6555 PLANTATION PRESERVE CIR, N.	
	CITY-ST-ZIP FT MYERS, FL. 33912			STREET ADDRESS FT MYERS, FL. 33912	
TITLE	NAME DAVID O'CONNELL		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP 11561 PLANTATION PRESERVE CIR, S.			STREET ADDRESS FT MYERS, FL 33912	
CITY-ST-ZIP	NAME			STREET ADDRESS	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or without other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 4-14-06 Daytime Phone #					