2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001221

FILED Feb 06, 2009 Secretary of State

| Entity Nan | ne: PLANTAT | ION CORPORATE PARK AS | SOCIATION, INC. | | |
|---|---|---------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| | WATER IS CIR ERS, FL 33908 | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| PMB 270. S 16520 S. TA FORT MYE | | US | | | |
| FEI Number: | 20-1708992 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address | Name and Address of New Registered Agent: | |
| | BUSAN WATER ISLAN ERS, FL 33908 | | | | |
| The above in the State | | ubmits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electroni | c Signature of Registered Age | ent | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () FITZGERALD, M P.O. BOX 13 ME WACCABUC, NY | AD STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | STD () MATTER, SUSAI 6341 TIDEWATE FORT MYERS, F | ER ISLAND CIR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () FITZGERALD, C 6341 TIDEWATE FORT MYERS, F | ER CIRCLE | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: SUSAN MATTER STD 02/06/2009