2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009678

FILED Apr 23, 2009 Secretary of State

Entity Name: PLANTATION PARK PRIVATE RESIDENCES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434, STE 5000 LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434, STE 5000 LONGWOOD, FL 327795044

FEI Number: 20-3555417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HART, JAMES W JR. C/O SENTRY MANAGEMENT, INC. 2180 W. SR 434, SUITE 5000 LONGWOOD, FL 327795044 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P () DeleteTitle:PD (X) Change () AdditionName:PECORELLA, KIMBERLYName:PECORELLA, KIMBERLYAddress:13000 MULBERRY PARK DRAddress:8300 ELM PARK DR #722City-St-Zip:ORLANDO, FL 32821 USCity-St-Zip:ORLANDO, FL 32821

Title: VP () Delete Title: VPD (X) Change () Addition

 Name:
 BUGZY, STEVEN
 Name:
 BUGAY, STEVEN

 Address:
 13000 MULBERRY PARK DR
 Address:
 2300 E LAS OLAS BLVD

 City-St-Zip:
 ORLANDO, FL 32821 US
 City-St-Zip:
 FORT LAUDERDALE, FL 33301

Title: ST () Delete Title: TSD (X) Change () Addition Name: CASTELLANOS, GABRIEL Name: CASTELLANOS, GABRIEL

 Address:
 13000 MULBERRY PARK DR
 Address:
 6209 ORANGE COVE DR

 City-St-Zip:
 ORLANDO, FL 32821 US
 City-St-Zip:
 ORLANDO, FL 23819

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: KIMBERLY PECORELLA PD 04/23/2009