

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90030 049 ****61.25

DOCUMENT # N12648

1. Entity Name

1300 LIVE OAK PLANTATION PROPERTY OWNERS
ASSOCIATION, INC.



Principal Place of Business

1371 MILLSTREAM
TALLAHASSEE FL 32312
US

Mailing Address

1371 MILLSTREAM
TALLAHASSEE FL 32312
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2958166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PADGETT, JOEL C
1371 MILLSTREAM
TALLAHASSEE FL 32312

Name

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

City

FL

Zip Code

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

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01-17-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete

NAME
WILSON, JUDY
STREET ADDRESS
1418 MILLSTREAM RD
CITY-ST-ZIP
TALLAHASSEE FL 32312

TITLE ☐ Delete

NAME
VP
RICHMOND, RON
STREET ADDRESS
1394 MILLSTREAM RD
CITY-ST-ZIP
TALLAHASSEE FL 32312

TITLE ☐ Delete

NAME
T
PADGETT, JOEL C
STREET ADDRESS
1371 MILLSTREAM RD.
CITY-ST-ZIP
TALLAHASSEE FL 32312

TITLE ☐ Delete

NAME
P
MILLER, RANDALL P
STREET ADDRESS
1334 MILLSTREAM
CITY-ST-ZIP
TALLAHASSEE FL 33312

TITLE ☒ Delete

NAME
S
DUBERT, EARL
STREET ADDRESS
1503 MILLSTREAM RD
CITY-ST-ZIP
TALLAHASSEE FL 32312

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: