2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N12648

1. Entity Name

1300 LIVE OAK PLANTATION PROPERTY OWNERS ASSOCIATION, INC.



FILED Mar 02, 2007 08:00 A Secretary of State

Principal Place of Business

1371 MILLSTREAM TALLAHASSEE, FL 32312 US

Mailing Address

1371 MILLSTREAM TALLAHASSEE, FL 32312

US



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CR2E037 (4/06) 02282007 No Chg-NP

4. FEI Number Applied For Not Applicable 59-2958166 \$8.75 Additional 5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

PADGETT, JOEL C 1371 MILLSTREAM TALLAHASSEE, FL 32312

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the obligations of registered agent.		
Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	``

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

	Due by may 1, 2007
10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICHMOND, RON 1394 MILLSTREAM RD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CTYY-ST-ZIP	T PADGETT, JOEL C 1371 MILLSTREAM RD. TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, RANDALL P 1334 MILLSTREAM TALLAHASSEE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S YOUNG, W.A. 1321 MILLSTREAM RD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET AODRESS CITY-ST-ZIP	

03/13/07-80056-006 61.25

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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 cath; 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	,

JOEL C. PAdgett ITURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

02-28-07