

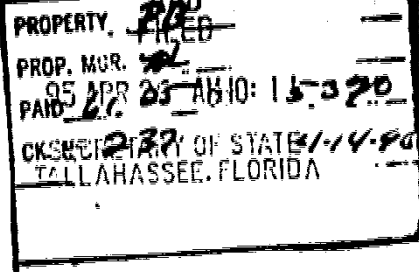
FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED



DOCUMENT # N12897 (7)

1. Corporation Name

PLANTATION BAY COMMUNITY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

100 PLANTATION DRIVE
ORMOND BCH. FL 32174

100 PLANTATION DRIVE
ORMOND BCH. FL 32174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/08/1986** 3a. Date of Last Report **04/27/1994**
4. FEI Number **59-2703068** Applied For ☐ Not Applicable ☐

2. Principal Place of Business 2a. Mailing Address
21 **103 A North Lake Dr** 25 **103 A North Lake Dr**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Ormond Beach FL** 26 **Ormond Beach, FL**
City & State City & State
23 **32174** 27 **USA**
Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
ROSS, DOUGLAS R., JR.
100 PLANATION DR.
ORMOND BCH. FL 32174

10. Name and Address of New Registered Agent
81 Name **NANCY D. HAPIUK**
82 Street Address **Diversified Property Mgmt, Inc**
83 **103 A North Lake Dr**
84 City **Ormond Beach** FL 85 Zip Code **32174**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Nancy D. Hapiuk, Property Manager** **NANCY D. HAPIUK** **4/14/95**
Signature, typed or printed name of registered agent and the date of signature (NOTE: Registered Agent signature required if agent is resigning) DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY ST ZIP
PD **ROSS, DOUGLAS R., JR.**
100 PLANTATION DRIVE
ORMOND BEACH FL
VD **HOSSEINI, MORI**
100 PLANTATION DRIVE
ORMOND BEACH FL
STD **TRINDER, JEAN**
100 PLANTATION DRIVE
ORMOND BEACH FL
1 **1**
NAME STREET ADDRESS CITY ST ZIP
NAME STREET ADDRESS CITY ST ZIP
NAME STREET ADDRESS CITY ST ZIP
NAME STREET ADDRESS CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP
21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP
31 TITLE ☐ Change ☐ Addition
32 NAME **ROYAL ANDERSON**
33 STREET ADDRESS **100 PLANTATION BAY DR**
34 CITY ST ZIP **Ormond Beach, FL 32174**
41 TITLE ☐ Change ☒ Addition
42 NAME **TED GARN**
43 STREET ADDRESS **100 PLANTATION BAY DR**
44 CITY ST ZIP **ORMOND BEACH, FL 32174**
51 TITLE ☐ Change ☒ Addition
52 NAME **CHARLENE IRLAND**
53 STREET ADDRESS **1150 Pelican Bay Dr**
54 CITY ST ZIP **Ormond Beach, FL 32174**
61 TITLE ☐ Change ☒ Addition
62 NAME **Mano D'Alencastro**
63 STREET ADDRESS **100 Plantation Bay Dr**
64 CITY ST ZIP **Ormond Beach, FL 32174**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 140.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if applicable, on an attachment with an address.

SIGNATURE: **Douglas R. Ross, Jr.** **4/14/95** **904 437-4164**
Signature and typed or printed name of signing officer or director Date Telephone #