

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90004 003 ****61.25

DOCUMENT # N12897 1. Entity Name PLANTATION BAY COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 103A NORTH LAKE DR ORMOND BEACH, FL 32174 US			Mailing Address 103A NORTH LAKE DR ORMOND BEACH, FL 32174 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2703068	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DEANE, NANCY 103A NORTH LAKE DR ORMOND BEACH, FL 32174				7. Name and Address of New Registered Agent Name Nancy Deane Chatley Street Address (P.O. Box Number is Not Acceptable) same 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 Nancy Deane Chatley DATE April 17, 2007 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	PD REITANO, ANTHONY 103A N. LAKE DR. ORMOND BEACH, FL 32174	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	PD John Gamin same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VPD FURCI, CARMINO 103A N. LAKE DR. ORMOND BEACH, FL 32174	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	VPD Katherine Pounds same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	SD GEMIN, WALTER A 103A N. LAKE DR. ORMOND BEACH, FL 32174	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	SD GERALD ELLSWORTH same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	TD HEROLD, GERALD 103A N. LAKE DR. ORMOND BEACH, FL 32174	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	TD MELVIN YOUNG same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D D'ALESSANDRO DEL 103A N. LAKE DR. ORMOND BEACH, FL 32174	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D FRANK KARINS same	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D KICIEYA, RONALD 103 A NORTH LAKE DR. ORMOND BEACH, FL 32174	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D Anthony Reitano same	☐ Change ☒ Addition
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 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 Walter A. L... SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 4/18/07 Daytime Phone # 396-586-7530		

Pg 1 of 2

see other side