

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14503

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** PLANTATION PINES LAND AND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

100 PINEWOODS ROAD  
ORMOND BCH., FL 32174

**New Principal Place of Business:**

100 PINE WOODS ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

100 PINEWOODS ROAD  
ORMOND BCH., FL 32174

**New Mailing Address:**

100 PINE WOODS ROAD  
ORMOND BEACH, FL 32174

**FEI Number:** 59-2655909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOVAK, CAROLE A  
3671 PLANTATION DR  
ORMOND BEACH, FL 32174 US

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

CASSANO, LISA  
3670 PINYON LANE  
ORMOND BEACH, FL 32174 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: LISA CASSANO

02/11/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TOBIAS, KEVIN  
Address: 171 PINE CONE DR  
City-St-Zip: ORMOND BEACH, FL 32174

Title: T ( ) Delete  
Name: NOVAK, CAROLE  
Address: 3671 PLANTATION DR  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP ( ) Delete  
Name: OWENS, LAMON  
Address: 3782 PINE CONE LN  
City-St-Zip: ORMOND BEACH, FL 32174

Title: S ( ) Delete  
Name: OWENS, ANGEL  
Address: 3782 PINE CONE ON  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SCHULTZ, JEFF  
Address: 3657 NEEDLES DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: T (X) Change ( ) Addition  
Name: CASSANO, LISA  
Address: 3670 PINYON LANE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP (X) Change ( ) Addition  
Name: WERT, PAUL  
Address: 3652 PONDEROSA DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: S (X) Change ( ) Addition  
Name: WERT, HELEN  
Address: 3652 PONDEROSA DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

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: LISA CASSANO

T

02/11/2009

Electronic Signature of Signing Officer or Director

Date