2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 8:00 am Secretary of State

DOCUMENT # N15475				·	04-17-2008 90044 046 ****61.25		
1. Entity Nam PLANTAT	ETON POINT CONDOMINIU	M ASSOCIATION, INC					
Principal Place of Business 103 A NORTH LAKE DR 0RMOND BEACH, FŁ 32174 US Mailing Address 103 A NORTH LAKE DR 0RMOND BEACH, FŁ 32174 US			174 US			Print 61 (1861)	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address					
2379 Beville Road		P.O. Box 291910			B! Bilt bidit alalı Biaşı etali Bibli Bib	IIII DI IKAI	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04072008 Chg-NP	CR2E037 (12/06)		
City & State S. Daytona, FL		City & State Port Orange, FL		4. FEI Number 59-2698603	 	oplied For ot Applicable	
Zip Country		Zip Country		5. Certificate of Status Desir	ed- \$8.75,Add	ditional	
32119	6. Name and Address of Current	32129-1910 Registered Agent	USA	7. Name and Address of No	162 Fee Require	d	
DEANE CHATLEY, NANCY			Name Na:	Name Nancy Deane Chatley			
103 A NORTH LAKE DR ORMOND BEACH, FL 32174			Street Address (P.O. Box Number is Not Acceptable) 2379 Beville Road				
ORMOND	BEACH, FL 32174						
*			City S. D.	S. Daytona, FL Zip Code 32119			
	named entity submits this statement to ions of registered agent.	r the purpose of changing its re	gistered office of	registered agent, or both, in the State	of Florida. I am familiar with,	and accept	
SIGNATURE .	Mancy D	. Chatley,	lomme	enty Mar	4/11/0	8	
	Signature, typed or printed name of phistered agent	and title if applicable. NOTE: F	Registered Agent signal	re required then reinstating?	DATE		
	Filing Fee Is \$61.25 Due by May 1, 2008	9 Election Camp Trust Fund Co	aign Financing	\$5.00 May Be	DATE Make check payable t Florida Department of S		
10.	Filing Fee Is \$61.25 Due by May 1, 2008 OFFICERS AND DIE	9 Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGES TO OF	Make check payable t Florida Department of S FICERS AND DIRECTORS IN	tate ‡	
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TITLE NAME STREET ADDRESS CFFY-ST-ZIP TITLE	Filing Fee Is \$61.25 Due by May 1, 2008 OFFICERS AND DIF D KALTNECKER, STANLEY JR 17 MAGNOLIA DR S ORMOND BCH., FL 32174 D MENZIES, PETER 9 MAGNOLIA DR S ORMOND BEACH, FL 32174	9 Election Camp Trust Fund Co RECTORS Delete	paign Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANGES TO OF	Make check payable to Florida Department of Significant Programment of Significant Programment of Significant Programment of Significant Programment P	1 10 Addition	
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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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/14/00

Daytime Phone #