2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# N15475

Entity Name: PLANTATION POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18 MAGNOLIA DR. S.
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

103 A NORTH LAKE DRIVE
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 59-2698603 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSKAMP, MARK
3511 S. PENINSULA DRIVE
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP
Name: KALTNECKER, STANLEY JR
Address: 17 MAGNOLIA DR S
City-St-Zip: ORMOND BCH., FL 32174

Title: D
Name: QUERTERMOUS, ROBERT
Address: 4 MAGNOLIA DR S
City-St-Zip: ORMOND BEACH, FL 32174

Title: T
Name: MORRISON, GEORGE
Address: 47 SCENIC VIEW DRIVE
City-St-Zip: NAPLES, ME 04055

Title: S
Name: MORRISON, GEORGE
Address: 11 MAGNOLIA DR S
City-St-Zip: DAYTONA BEACH, FL 32119

Title: PRES
Name: PETERS, PHILLIP
Address: 18 MAGNOLIA DR S
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: SCHLESZ, RON
Address: 1432 GOLD CLUB LANE
City-St-Zip: CROSSVILLE, TN 38571

I hereby 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 all other like empowered.

SIGNATURE: PHIL PETERS PRES 03/30/2010

Electronic Signature of Signing Officer or Director Date