

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 14, 2009
Secretary of State

DOCUMENT# N16491

Entity Name: THE PLANTATION AT PONTE VEDRA, INC.**Current Principal Place of Business:**220 PLANTATION CIRCLE
PONTE VEDRA, FL 32082 US**New Principal Place of Business:****Current Mailing Address:**101 PLANTATION DR.
PONTE VEDRA, FL 32082 US**New Mailing Address:****FEI Number:** 59-2855473**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FOWLER, WHITE, BOGGS & BANKER
50 N. LAURA STREET #2200
JACKSONVILLE, FL 32202 US**Name and Address of New Registered Agent:**SMITH, GAMBRELL, & RUSSELL, LLP
50 NORTH LAURA STREET, SUITE 2600
JACKSONVILLE, FL 32202 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: DOUG STANFORD

07/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** VD () Delete
Name: GREG, TUNIS
Address: 176 GOVERNORS ROAD
City-St-Zip: PONTE VEDRA, FL 32082**Title:** VD () Delete
Name: HARRIS, JOHN
Address: 193 TWELVE OAKS LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082**Title:** TSD () Delete
Name: MORRIS, JAY
Address: 106 MUIRFIELD DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082**Title:** SD () Delete
Name: NICHOLS, HERB
Address: 101 LAUREL WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: JAY MORRIS

TSD

07/14/2009

Electronic Signature of Signing Officer or Director

Date