## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N32499

FILED Mar 23, 2010 Secretary of State

Entity Name: HIBERNIA PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

767 BLANDING BLVD

**STE 112** 

ORANGE PARK, FL 32065 US

Current Mailing Address: New Mailing Address:

767 BLANDING BLVD

**STE 112** 

ORANGE PARK, FL 32065 US

FEI Number: 59-2975342 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HALL, GEORGE H 4736 BLANDING BLVD.

JACKSONVILLE, FL 32210 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:

Electronic Signature of Registered Agent Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

Title: VP

Name: LIKENS, DIANNA Address: 2369 JENNIE LANE

City-St-Zip: FLEMING ISLAND, FL 32003

Title: D

Name: EASTERLING, MARK
Address: 2351 BRIDGETTE WAY
City-St-Zip: FLEMING ISLAND, FL 32003

Title:

Name: NEW, DARRELL Address: 1502 KATHLEEN WAY

City-St-Zip: GREEN COVE SPRINGS, FL 32003

Title: F

Name: LARIMORE, EMORY
Address: 1401 SCARLETT WAY
City-St-Zip: FLEMING ISLAND, FL 32003

Title:

 Name:
 WATSON, SAM

 Address:
 2398 SHAWNA LANE

 City-St-Zip:
 FLEMING ISLAND, FL 32003

Title:

 Name:
 SPIVEY, SUSIE

 Address:
 1499 KATHLEEN WAY

 City-St-Zip:
 FLEMING ISLAND, FL 32003

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: NEAL P. NEWFIELD CAM 03/23/2010