## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N34124

(0)

## PLANTATION NEIGHBORHOOD PROPERTY OWNERS ASSOCIATION INC.

ION, IN	C.				
Principal Place of Business		Mailing Address			TI BIBIT BIBIT BIBIT BIBIT BIBIT BIBIT IBBI
% GEORGE M. HARPER 407 PLANTATION RD TALLAHASSEE FL 32303		% GEORGE M. HARPER 407 PLANTATION RD TALLAHASSEE FL 32303-43	205		
INCENTINGSEE		(NEUTRINOGEE I E DEGO TE	•••	3. Date incorporated or Qualified 09/12/1989	3a. Date of Last Report 01/24/1996
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		44-9227861	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
<b>23</b> Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for it	
24	25	29	30		Yes No
	9. Name and Address of Cur			10. Name and Address of New Reg	
			81 Name	man M Harra	7 2/1
HARPER.	GEORGE M.		82 Street Ado	less (2) Box Nymber is Not Accept to	le) A
	VITATION RD		407	Hantation P.	<u> </u>
TALLAHA	ISSEE FL 32303		83		
			84 Gety 7	7/ /	85 De Code . 2
			19	Unhasse	FL 2/3/2
11. Pursuant to	to the provisions of Sections 617. egistered agent, or both, in the St	0502 and 617.1508, Florida Statu late of Florida, Such change was	tes, the above-named cor authorized by the corpora	poration submits this statement for the patients board of directors. I bereby accept	urpose of changing its registered
agent. I a	m familiar with, and accept the of	oligations of, Section 617,0503, FI	orida Statutes.	ation's board of directors. I hereby accept	The appointment of Eguteros
SIGNATURE	ywam	W W	manae		
12.	Significal typed or printed name of registered	a spent and title if applicable. (NOTAND DIRECTORS	E: Registered Apent to ature request.	ured when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
TILE	DTS	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	HARPER, GEORGE M.		1.2 NAME		
STREET ADDRESS	407 PLANTATION RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP		
TITLE	DP	☐ DELETE	2.1 TITLE		Change Addition
NAME	SMITH, WILLIAM C.		2.2 NAME	±1.*	±4. • • • • • • • • • • • • • • • • • • •
STREET ADURESS	416 PLANTATION RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		2. 4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	31 TITLE		Change Addition
NAME	MORSE, J.M.		32 NAME		
STREET ADDRESS	504 PLANTATION RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TETLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		Et change E Adultion
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME		<u> </u>	6.2 NAME		_ • -
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I do heret	by certify that the information sup	plied with this filing does not qual	ify for the exemption state	d in Section 119.07(3)(i), Florida Statutes	s. I further certify that the
l am an o	fficer or director of the corporatio	n or the receiver or trustee empor	wered to execute this repo	at my signature shall have the same lega ort as required by Chapter 617, Florida S	tatutes; and that my name
appoars i	n Block 12 or Block 13 if changei	d, or on an attachment with an ad	dres#	111 1	÷