

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90195 017 ****61.25

DOCUMENT # N37485

1. Entity Name
**THE TENTH FAIRWAY AT THE PLANTATION
CONDOMINIUM OWNERS ASSOCIATION, INC.**



Principal Place of Business
**ADVANCED MANAGEMENT, INC.
899 WOODBRIDGE DRIVE
VENICE, FL 34293**

Mailing Address
**ADVANCED MANAGEMENT, INC.
899 WOODBRIDGE DRIVE
VENICE, FL 34293**

4000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04102006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0224823

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ADVANCED MANAGEMENT, INC.
899 WOODBRIDGE DR
VENICE, FL 34293**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☐ Delete
NAME ZACH, LEROY
STREET ADDRESS 899 WOODBRIDGE DR
CITY-ST-ZIP VENICE, FL

TITLE TSD ☐ Change ☒ Addition
NAME MIRO LACKA
STREET ADDRESS 899 WOODBRIDGE DR.
CITY-ST-ZIP Venice FL 34293

TITLE PD ☐ Delete
NAME WOODS, ALLAN I
STREET ADDRESS 899 WOODBRIDGE DR
CITY-ST-ZIP VENICE, FL 34293

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TSD ☒ Delete
NAME HILL, GEORGE
STREET ADDRESS 899 WOODBRIDGE DR
CITY-ST-ZIP VENICE, FL 34293

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Atlan Wood **Atlan Wood** 4/17/06

Date

Daytime Phone #

941-499-0287