

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40256

FILED
Jun 10, 2009
Secretary of State

Entity Name: PEDRICK PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PAUL BROWN
5538 PEDRICK PLANTATION CIRCLE
TALLAHASSEE, FL 32311

New Principal Place of Business:

Current Mailing Address:

C/O PAUL BROWN
5538 PEDRICK PLANTATION CIRCLE
TALLAHASSEE, FL 32311

New Mailing Address:

FEI Number: 59-3125878 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BROWN, PAUL N
5538 PEDRICK PLANTATION CIRCLE
TALLAHASSEE, FL 32311 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARBAR, ELIZABETH
Address: 5522 PEDRICK PLANTATION CIRCLE
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD () Delete
Name: BROWN, PAUL N.
Address: 5538 PEDRICK PLANTATION CIR.
City-St-Zip: TALLAHASSEE, FL

Title: SD () Delete
Name: GARBER, BRIAN
Address: 5522 PEDRICK PLANTATION CIRCLE
City-St-Zip: TALLAHASSEE, FL 32317

Title: SD () Delete
Name: YOUNG, JAY
Address: 5530 PEDRICK PLANTATION CIR
City-St-Zip: TALLAHASSEE, FL 32317

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: PAUL N. BROWN

TD

06/10/2009

Electronic Signature of Signing Officer or Director

Date