

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41050

FILED  
Mar 27, 2008  
Secretary of State

**Entity Name:** PLANTATION VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5330 SW 91ST TERRACE  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

**Current Mailing Address:**

5330 SW 91ST TERRACE  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

**FEI Number:** 59-3070408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRIPPE, PAT  
5341ST 91ST TERR  
GAINESVILLE, FL 32608 US

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

TRIPPE, PAT  
5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 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:

03/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RUSSO, DAN  
Address: 8224 SW 16TH PL  
City-St-Zip: GAINESVILLE, FL 32607

Title: DST ( ) Delete  
Name: DAVIS, BARRY  
Address: 5202 SW 97TH WY  
City-St-Zip: GAINESVILLE, FL 32608

Title: PD ( ) Delete  
Name: BURKE, JEFF  
Address: 2720 SW 98TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RUSSO, DAN  
Address: 8224 SW 16TH PL  
City-St-Zip: GAINESVILLE, FL 32607

Title: VP (X) Change ( ) Addition  
Name: ALFIERI, MARK  
Address: PO BOX 357732  
City-St-Zip: GAINESVILLE, FL 32635

Title: S (X) Change ( ) Addition  
Name: BATES, MARILYN  
Address: 9734 SW 52ND ROAD  
City-St-Zip: GAINESVILLE, FL 32608

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: DANIEL RUSSO

P

03/27/2008

Electronic Signature of Signing Officer or Director

Date