

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001377

FILED  
Dec 06, 2007  
Secretary of State

**Entity Name:** PLANTATION VISTA PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

POB 1263  
HIGHLAND CITY, FL 33846 US

**New Principal Place of Business:**

5340 PLANTATION VISTA WAY  
LAKE LAND, FL 33813 US

**Current Mailing Address:**

POB 1263  
HIGHLAND CITY, FL 33846 US

**New Mailing Address:**

**FEI Number:** 59-3229943 **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:**

COKER, GAIL  
2104 CLUBHOUSE RD  
LAKE LAND, FL 33813 US

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

OLDS, JAMES H  
5340 PLANTATION VISTA WAY  
LAKE LAND, FL 33813 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: JAMES H. OLDS

12/06/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OLDS, JAMES  
Address: 5340 PLANTATION VISTA WAY  
City-St-Zip: LAKE LAND, FL 33813

Title: TD ( ) Delete  
Name: CAVALLARO, PATRICIA  
Address: 2004 CLUBHOUSE RD  
City-St-Zip: LAKE LAND, FL 33813

Title: VPDS ( ) Delete  
Name: COKER, GAIL  
Address: 2104 CLUBHOUSE RD  
City-St-Zip: LAKE LAND, FL 33813

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: KITTE RMAN, PAMELA  
Address: 5328 PLANTATION VISTA WAY  
City-St-Zip: LAKE LAND, FL 33813

Title: SEC (X) Change ( ) Addition  
Name: DUNCAN, GLEN  
Address: 5351 PLANTATION VISTA WAY  
City-St-Zip: LAKE LAND, FL 33813

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: JAMES H. OLDS

PRES

12/06/2007

Electronic Signature of Signing Officer or Director

Date