

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 30, 2008 8:00 am
Secretary of State

05-30-2008 90215 032 ****61.25

DOCUMENT # N95000001285

1. Entity Name

PLACIDA HARBOUR, SECTION IX CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

11000 PLACIDA ROAD
PLACIDA FL 33946

Mailing Address

11000 PLACIDA ROAD
PLACIDA FL 33946



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0569844

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PLACIDA PROPERTIES
11000 PLACIDA RD
PLACIDA FL 33946

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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
OCKER, DONALD
32 CUTTING CROSS WAY
WAYLAND MA 01778 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HAKE, AL
11000 PLACIDA ROAD, 801
PLACIDA FL 33946 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
DEHNER, GERALD
11000 PLACIDA ROAD, 901
PLACIDA FL 33946 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SARGEANT, JOYS
11000 PLACIDA ROAD, 902
PLACIDA FL 33946 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE
NAME
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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T
David Wynja
11000 Placida Rd #804
Placida, FL 33946 ☐ Change ☒ Addition

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Al Hake

5/31/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

County Phone #