## ∵ 2002 UNIFORM BUSINESS REPOR™(UBR):

## DOCUMENT # N9500005096

	2 UNIFORM BUSI		RT (UB	R)	5/2 , <b>J</b>	Jun 25, Secret	2002 8 ary of	3:00 am State	
1. Entity Nac		00090			/		2 901 48 039 *		
PLANTA	ATION COVE CONDOMINIUM A	SSOCIATION, INC.		/	<b>/</b>				
Principal Pia	ice of Business	Mailing Address	<del></del> .	<u></u>					
145 SO. ATLANTIC AVENUE ORMOND BEACH FL 32178		2345 SAND LAKE ROAD STE 100 ORLANDO FL 32809			DO NOT WRITE IN THIS SPACE				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.							
City & State		City & State			4. FEI Number 59-3001407 Applied For Not Applicable				
Zip	Country	Zip	Country		5. Certificate of S	atus Desired [	eg 75 A.	ditional	
، مخرونسد،	6. Name and Address of Current R	egistered Agent	Name		7. Name and Add	Ireas of New Regis	tered Agent	الم معروب	
KORSHAK; STEVEN D ESQ 2345 SAND LAKE ROAD STE 120				Address (I	dress (P.O. Box Number is Not Acceptable)				
ORLANDO	FL 32809		City			_	FL Zip Code		
			Registered Agent signature required when reinstating)  DATE  Datign Financing \$5.00 May Be ntribution.   Added to Fees   Department of State						
10.	OFFICERS AND DIRE	CTOPS	11.		DDITIONS/CHANG	·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KULZER, JEFFREY J 209 SO. ORANGE AVENUE DELAND FL 32720	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP	S Kul: 234	zer, Jeff 5 Sand La	rey J ke Road,	Change	Addition (9/01)	
TITLE NAME STREET ADDRESS CITY-S1-ZIP	PD STUMBRAS-SANCHEZ, SULYN 2345 SAND LAKE RD., SUITE 100	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Stu 234	<del>ando, FL</del> mbras-San 5 Sand La	chez, Sul ke Road,		☐ Addition S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ERFURTH, CARY J 2345 SAND LAKE RD., SUITE 100 ORLANDO FL 32809	. Defeta	NAME STREET ADDRESS CITY-ST-ZIP	Orl	ando, PL	32809	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKS, THOMAS 2345 SAND LAKE RD., SUITE 100 ORLANDO FL 32809	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMPRICHT, ALFRED 2345 SAND LAKE RD., SUITE 100 ORLANDO FL 32809	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE VAME STREET ADORESS		☐ Delete	TITLE NAME STREET ADDRESS				☐ Change	Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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:

407-859-8900

**FILED**