2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

Secretary of State DOCUMENT # N95000005096 01-23-2007 90018 039 ****70.00 PLANTATION COVE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 60004986 145 SO. ATLANTIC AVENUE 8680 COMMODITY CIR ORMOND BEACH, FL 32176 ORLANDO, FL 32819 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3437799 Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KORSHAK, STEVEN D ESQ 8680 COMMODITY CIR STE 101 Street Address (P.O. Box Number is Not Acceptable) ORLANDO, FL 32819 City 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition SANDERS, NANCY NAME 8680 COMMODITY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME FELICIANO, LUIS NAME STREET ADDRESS 8680 COMMODITY CIR STREET ADDRESS ORLANDO, FL 32819 CITY-ST-ZIP CITY-ST-ZIP DST Delete TITLE ☐ Change Addition ERFURTH, CARY J NAME NAME STREET ADDRESS 8680 COMMODITY CIDR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP TITLE DV ☐ Delete TITLE ☐ Change Addition BANKS, THOMAS NAME STREET ADDRESS 8680 COMMODITY CIR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32809 CITY-ST-7IP TITLE ☐ Delete TITLE X Change ☐ Addition D/P LAMPRICHT, ALFRED NAME NAME Lamprecht, Alfred 8680 COMMODITY CIR STREET ADDRESS STREET ADDRESS 8680 Commodity Circle CITY - ST - ZIP ORLANDO, FL 32819 CITY-ST-ZIP Orlando, FL 32819

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 ap address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

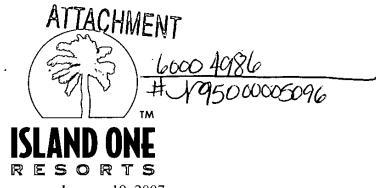
ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

Change

Addition

FILED Jan 23, 2007 8:00 am



January 19, 2007

VIA OVERNIGHT MAIL

Florida Department of State Division of Corporations 2670 Executive Center Circle, Suite 100 Tallahassee, FL 32301

Re: Cove II Owners Association, Inc. / Document # N06000005556

Ladies and Gentlemen:

Please find enclosed the following information the above referenced company:

- 2007 Annual Report
- Check # 0000024 in the amount of \$70.00 in payment of the fees

Please forward the Certificate of Status to my attention. If you have any questions or need anything further, please feel free to contact me.

Sincerely,

Barbara A. Kerchner

Manager of Legal Services

Enclosures