


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000000728 1. Entity Name PLANTATION ISLAND ESTATES HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 14600 SW 136 STREET MIAMI, FL 33186 US	Mailing Address 14600 SW 136 STREET MIAMI, FL 33186 US
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DO NOT WRITE IN THIS SPACE



03092005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0643193	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HARRIS, ELLIOTT 111 SW 3RD STREET 6TH FLOOR MIAMI, FL 33130
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IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GOLDRING, KENNETH D 14600 SW 136 STREET MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HARRIS, ELLIOT 111 SW 3RD STREET 6TH FLOOR MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CASTELLANO, RAIMUNDO 14600 SW 136 STREET MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/11/05-80044-012 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:  Elliot Harris	3-14-05	305 358 0146
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>