2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2011
Secretary of State

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Entity Name: GOVERNOR'S PLANTATION, UNIT 1 HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3545 U.S. HWY. 1 SOUTH
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

461 A1A BEACH BLVD
SAINT AUGUSTINE, FL 32080

New Mailing Address:

C/O JACOBS JACOBS & ASSOCIATES, INC.
461 A1A BEACH BLVD.
SAINT AUGUSTINE, FL 32080

FEI Number: 59-3624555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACOBS, PHILIP H
461 A1A BEACH BLVD
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CUNNINGHAM, GARY
Address: 345 OLD PLANTATION DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VPD
Name: SHAW, JASON
Address: 349 OLD PLANTATION DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: D
Name: DIMARE, FRANK
Address: 3545 US HWY 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: STD
Name: MIGNON, TAMI
Address: 340 OLD PLANTATION DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

I hereby 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 all other like empowered.

SIGNATURE: PHILIP H. JACOBS RA 02/22/2011

Electronic Signature of Signing Officer or Director Date