

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005119

FILED
Mar 23, 2007
Secretary of State

Entity Name: ROSE CREEK PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ROUTE 9, BOX 983, SOUTHWOOD LANE
LAKE CITY, FL 32024 US

New Principal Place of Business:

259 SW BENZ WAY
LAKE CITY, FL 32024 US

Current Mailing Address:

P O BOX 1042
LAKE CITY, FL 32056 US

New Mailing Address:

FEI Number: 59-3634153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURBACH, ROBIN M TREAS
PO BOX 1042
LAKE CITY, FL 32056 US

Name and Address of New Registered Agent:

BURBACH, ROBIN M TREAS
259 SW BENZ WAY
LAKE CITY, FL 32056 US

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: ROBIN M BURBACH

03/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: FITZHUGH, JUSTIN M D/P
Address: ROUTE 9, BOX 983, SOUTHWOOD LANE
City-St-Zip: LAKE CITY, FL 32024 US

Title: D/S () Delete
Name: CADY, ALISHA A D/S
Address: P.O. BOX 278
City-St-Zip: LAKE CITY, FL 32056 US

Title: D/T () Delete
Name: BURBACH, ROBIN M D/T
Address: P O BOX 1042
City-St-Zip: LAKE CITY, FL 32056 US

Title: VD (X) Delete
Name: HANDY, MIKE
Address: P.O. BOX 3177
City-St-Zip: LAKE CITY, FL 32056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: HANDY, MIKE D/P
Address: PO BOX 3177
City-St-Zip: LAKE CITY, FL 32056 US

Title: D/S (X) Change () Addition
Name: GRECIAN, MIKALA D/S
Address: P.O. BOX 709
City-St-Zip: LAKE CITY, FL 32056 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBIN M BURBACH

TREA

03/23/2007

Electronic Signature of Signing Officer or Director

Date