

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115399

FILED
Apr 05, 2006
Secretary of State

Entity Name: THE PLANTATION RESIDENTS GOLF CLUB, INC.

Current Principal Place of Business:

4923 LONG MEADOW DR
LEESBURG, FL 34748

New Principal Place of Business:

4720 PLANTATION BLVD
LEESBURG, FL 34748

Current Mailing Address:

4923 LONG MEADOW DR
LEESBURG, FL 34748

New Mailing Address:

4720 PLANTATION BLVD
LEESBURG, FL 34748

FEI Number: 42-1678004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, MAYNARD
4923 LONG MEADOW DR
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

THOMPSON, MAYNARD L PRESIDE
4923 LONG MEADOW DR
LEESBURG, FL 34748 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: MAYNARD THOMPSON

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: THOMPSON, MAYNARD
Address: 4923 LONG MEADOW DR
City-St-Zip: LEESBURG, FL 34748

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: THOMPSON, MAYNARD PRESIDE
Address: 4923 LONG MEADOW DR
City-St-Zip: LEESBURG, FL 34748

Title: SECR () Change (X) Addition
Name: COSMI, PATRICIA SECRETA
Address: 25743 GLEN EAGLE DR
City-St-Zip: LEESBURG, FL 34748

Title: TREA () Change (X) Addition
Name: SENDELBACK, WILLIAM TREASUR
Address: 3835 PLANTATION BLVD
City-St-Zip: LEESBURG, FL 34748

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAYNARD THOMPSON

PRES

04/05/2006

Electronic Signature of Signing Officer or Director

Date