


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 24, 2007 8:00 am**  
**Secretary of State**


07-24-2007 90038 004 \*\*\*150.00

<b>DOCUMENT # P06000014359</b>	
1. Entity Name <b>PLANTATION INN REALTY, INC.</b>	

Principal Place of Business <b>318 N SCENIC HWY LAKE WALES FL 33853</b>	Mailing Address <b>318 N SCENIC HWY LAKE WALES FL 33853</b>
<i>P.O. Box 671</i>	<i>P.O. Box 671</i>
<i>33859-0671</i>	

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

**40140141**



2nd MOORE CR2E034 (4/07)

4. FEI Number <b>20-4274447</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent	
<b>KAHLER, JAMES F 318 N SCENIC HWY LAKE WALES FL 33853</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

<b>FILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 Make Check Payable to Florida Department of State</b>	S.607 193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input type="checkbox"/>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D KAHLER, JAMES F 318 N SCENIC HWY LAKE WALES FL 33853</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D KAHLER, NANCY D 318 N SCENIC HWY LAKE WALES FL 33853</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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:** *James F. Kehler* **7/16/07** **863-676-1614**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT  
40126747  
# P06000014359



The Plantation Inn Realty

JAMES F. KAHLER, REALTOR • P.O. BOX 671 • LAKE WALES, FL 33853 • (863) 676-1614 • FAX (863) 676-5733

7/16/07

Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

To Whom it May Concern -

Last year we incorporated our  
Plantation Inn Realty business.  
I recently received a postcard about sending  
an annual report and since I do not  
use computers, I sent in the request  
for a form to be mailed which I  
received today.

I just phoned Debra @ 850-245-6096  
questioning the late fee - she suggested I  
write this note asking to waive the  
late fee when I send payment of \$150.00  
since I just received the necessary form.

Thank you,  
Nancy Kahler