

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P39943

1. Entity Name
THE PLANTATION AT LEESBURG, INC.



Principal Place of Business
**25201 HIGHWAY 27 SOUTH
LEESBURG, FL 34748-9099**

Mailing Address
**25201 HIGHWAY 27 SOUTH
LEESBURG, FL 34748-9099**



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1783253

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THIELE, EARL H
25201 US HIGHWAY 27 SOUTH
LEESBURG, FL 32748**

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000430515
02/22/06-80051-011 150.00**

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	RICHARDSON, PETER L.
STREET ADDRESS	266 POST ROAD EAST
CITY-ST-ZIP	WESTPORT, CT
TITLE	DVT
NAME	HEMPHILL, ROSS
STREET ADDRESS	25201 US HWY 27
CITY-ST-ZIP	LEESBURG, FL 34748
TITLE	P
NAME	THIELE, EARL H.
STREET ADDRESS	25201 HIGHWAY 27 SOUTH
CITY-ST-ZIP	LEESBURG, FL
TITLE	VS
NAME	TONRY, ROBERT
STREET ADDRESS	25201 US HIGHWAY 27 SOUTH
CITY-ST-ZIP	LEESBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

Robert B. Tonry, Secretary/Treasurer

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/06

Date

352-326-4170

Daytime Phone #