FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000009338 (4)

DONNA PLANTATION INCORPORATED

Principal Place of Business	Mailing Address	
RT 6 BOX 61 OUINCY FL 32351	RT 6 BOX 61 QUINCY FL 32351	
2. Principal Place of Business	2a. Mailing Address	
2. Principal Place of Business 21 Suite, Apt. #, etc	2a. Mailing Address 26 Suite. Apt. #, etc.	

FILED May 01 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/04/1992 4. FEI Number Applied For 59-3153282 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zιρ Country Country This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. ☐ No 30 24 25 20 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 HARTMAN, ALFRED C RT 6 BOX 61 Street Address (P.O. Box Number is Not Acceptable) **QUINCY FL 32351** 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition HARTMAN, ALFRED C NAME 1.2 NAME RT 6 BOX 61 STREET ADDRESS 1.3 STREET ADDRESS **QUINCY FL 32351** CITY-ST-ZIP 1.4 City-St-ZiP ☐ DELETE Addition TITLE 2.1 TITLE HARTMAN, DONNA J NAME 2.2 NAME **RT 6 BOX 61** STREET ADDRESS 2.3 STREET ADDRESS QUINCY FL 32351 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 City-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address.

SIGNATURE:

CHARTMAN

4-20-98 224-0026