2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# 730293

Entity Name: DEERWOOD VILLAS II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-1564288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W SR 434 STE 5000
LONGWOOD, FL 327795404 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: AQUINO, JACKIE
Address: 10112 LEISURE LANE SOUTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD ( ) Delete
Name: ADAMS, JOHN
Address: 10023 LEISURE LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: VD ( ) Delete
Name: BURROUGHS, ANN
Address: 1234 LEISURE LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD (X) Delete
Name: PIKE, DOROTHY
Address: 10141 CROSS GREEN WAY
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD ( ) Delete
Name: WESTON, STAN
Address: 10015 LEISURE LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: AQUINO, JACKIE
Address: 10112 LEISURE LANE SOUTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD (X) Change ( ) Addition
Name: MANIER, TERRY
Address: 10154 CROSS GREEN WAY
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPD (X) Change ( ) Addition
Name: BURROUGHS, ANN
Address: 8221-9 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32256

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 Section 119.07(3)(i), 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: STAN WESTON PD 04/13/2004

Electronic Signature of Signing Officer or Director — Date