FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 761992

(7)

DEER RUN HOMEOWNERS ASSOCIATION #1, INC.									
Principal Place of Business		Mailing Address					IIDI BIBII BIBII BIBII BI	ON BEDER DIBNE IOD	
C/O STEPHEN W. KELLER 641 DEER RUN CT. CASSELBERRY FL 32707		C/O STEPHEN W. KELLER 641 DEER RUN CT. CASSELBERRY FL 32707							
						3. Date Incorporated or Qualified 02/16/1982	3a. Date of Last Report 05/01/1995		
2. Principal P	lace of Business	2a. Mailing Address 26	, Mailing Address			4. FEI Number 59-2253918	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	3			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	¬ ·			Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees	
Zıp 24	Country 25	Zip 29	30	intry		This corporation has liability for in Florida Statutes	tangible tax under		
	9. Name and Address of Curre	nt Registered Agent	17.7			10. Name and Address of New Re			
				81	Name				
KELLER				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
641 DEER RUN CT. CASSELBERRY FL 32707									
				84	City		85	Zip Code	
44 0									
or registe	to the provisions of Sections 617,0502 red agent, or both, in the State of Flori ith, and accept the obligations of, Seci	da. Such change was authoriz	ed by the d	ve-n	amed corpoi oration's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ose of changing its ntment as register	s registered office ed agent. I am	
SIGNATURE			•						
	Signature, typed or printed name of registered agent			Agent	signature require	od when reinstaling)	DATE		
12.		D DIRECTORS	13.		—	ADDITIONS/CHANGES TO OFFIC			
TITLE	PD DOBERT	Differe	☐ DELETE 11 TH		ľ		Change	Addition	
NAME OTOTET ADDRESS	HEYDRICK, ROBERT		1.2 NA						
STREET ADDRESS	CACCELEEDDV EL 00707				ADDRESS				
CITY-ST-2IP TITLE	CASSELBERRY FL 32707 VD	DELETE	1.4 CIT		-ZIP			- ED Address	
NAME	MATLOCK, MOSE		2.1 TITLE				☐ Change	Addition	
STREET ADDRESS	AND DEED BUILDE			2.2 NAME 2.3 STREET ADDRESS					
	CACCEL REDDY EL ANTOT								
CITY-ST-ZIP TITLE	44		2. 4 C 3.1 T(1		T-ZIP		Change	Addition .	
NAME	CELLUCCI, CLAUDIO						☐ Change	Addition	
STREET ADDRESS	633 DEER RUN CT.		3.2 NA		4 DDDCCC				
CITY-ST-ZIP	CASSELBERRY FL 32707				ADDRESS				
TITLE	TD	TDELETE	3.4. CITY - 4.1 TITLE		1-212		☐ Change	Addition	
NAME	KELLER, STEVE		4 2 N					. L Addition	
STREET ADDRESS	641 DEER RUN CT.				ADDRESS				
CITY-ST-ZIP	CASSELBERRY FL 32707		4.3 STREET						
TITLE		DELETE	5.1 TITLE		-211		☐ Change	Addition	
NAME		_	5.2 NA		1		ondings		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CI						
TITLE		DELETE	6.1 TIT				Change	: Addition	
NAME		-	6.2 NA						
STREET ADDRESS					ADDRESS			İ	
CITY-ST-ZIP			6.4 CIT						
	y certify that the information supplied	with this filing is voluntarily furn	ished and d	does	not qualify for	or the exemption stated in Section 119.07	7(3)(k), Florida Stat	utes. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address.

SIGNATURE: STEPHEN W. KEVEN

4076958325 Daytime Phone #