


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # N03000005241
 1. Entity Name
DEERFIELD TRACE COMMUNITY, INC.



Principal Place of Business Mailing Address
2495 DOBBS ROAD **2495 DOBBS ROAD**
ST AUGUSTINE, FL 32086 **ST AUGUSTINE, FL 32086**



04142008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2116081 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
FLIPPIN, JAMES M
2495 DOBBS ROAD
ST AUGUSTINE, FL 32086

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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

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000901285
 04/29/08-80063-010 61.25

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	FLIPPIN, ORAL J
STREET ADDRESS	304 ELEMENTARY WAY
CITY-ST-ZIP	ST. AUGUSTINE, FL 32086
TITLE	T
NAME	FLIPPIN, ORAL J
STREET ADDRESS	304 ELEMENTARY WAY
CITY-ST-ZIP	ST. AUGUSTINE, FL 32086
TITLE	VP
NAME	GIORDANO, AL
STREET ADDRESS	100 SOUTHWALK PLACE
CITY-ST-ZIP	ST. AUGUSTINE, FL 32086
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 617, 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: *Oral J. Flippin* **ORAL J. FLIPPIN** **4-14-2008**