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Feb 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05500 (6)

1. Corporation Name

DEER RUN HOMEOWNERS' ASSOCIATION #14, INC.



Principal Place of Business

Mailing Address

DEER RUN HOA 14, INC.
POST OFFICE BOX 3640
WINTER SPRINGS FL 32708
US

DEER RUN HOA 14, INC.
POST OFFICE BOX 3640
ORLANDO FL 32708-0640
US

3. Date Incorporated or Qualified
10/05/1984

3a. Date of Last Report
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-2470737

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEFFRIES, WILLIAM
237 SOUTH WILDERNESS POINT
CASSELBERRY FL 32707

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME GALLINGER, ROBERT
STREET ADDRESS 4045 E. MARYLAND PLACE
CITY - ST - ZIP CASSELBERRY FL

1.1 TITLE P Change Addition
1.2 NAME HENDRICKS, CAROL
1.3 STREET ADDRESS 4033 CROSSROADS PLACE
1.4 CITY - ST - ZIP CASSELBERRY, FL 32707

TITLE PD DELETE
NAME STILWELL, JAMES
STREET ADDRESS 4064 E. MARYLAND PLACE
CITY - ST - ZIP CASSELBERRY FL

2.1 TITLE V Change Addition
2.2 NAME TUPPER, SHEILA
2.3 STREET ADDRESS 4029 CROSSROADS PLACE
2.4 CITY - ST - ZIP CASSELBERRY, FL 32707

TITLE VD DELETE
NAME DENTON, SUSAN
STREET ADDRESS 4037 W. MARYLAND PLACE
CITY - ST - ZIP CASSELBERRY FL

3.1 TITLE S Change Addition
3.2 NAME BERNSTEIN, ROCKY
3.3 STREET ADDRESS 3965 JOURNEY CT.
3.4 CITY - ST - ZIP CASSELBERRY, FL 32707

TITLE D DELETE
NAME BIGHAM, JUNE
STREET ADDRESS 4020 W. MARYLAND PLACE
CITY - ST - ZIP CASSELBERRY FL

4.1 TITLE T Change Addition
4.2 NAME SNOWDY, ROBERT
4.3 STREET ADDRESS 4145 CROSSROADS PLACE
4.4 CITY - ST - ZIP CASSELBERRY, FL 32707

TITLE D DELETE
NAME ARMSTRONG, LOIS
STREET ADDRESS 3929 JOURNEY COURT
CITY - ST - ZIP CASSELBERRY FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE SD DELETE
NAME DEAN, SUSAN
STREET ADDRESS 4012 W. MARYLAND PLACE
CITY - ST - ZIP CASSELBERRY FL

6.1 TITLE D Change Addition
6.2 NAME LAMB, BESSIE
6.3 STREET ADDRESS 284 N. WILDERNESS PT.
6.4 CITY - ST - ZIP CASSELBERRY FL 32707

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CAROL B HENDRICKS *Carol B. Hendricks* 2/16/97 (907) 695-8649

CR2E037 (9/96)

BLOCK 13 (CONTINUED)

Title: D

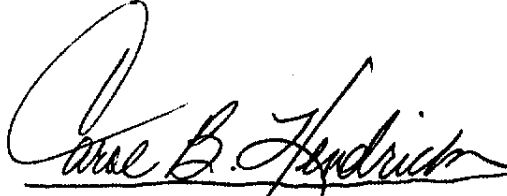
NAME: FENTON, NANCY

STREET: 190 POST WAY

CITY: CASSELBERRY, FL 32707

BLOCK 14:

CAROL HENDRICKS


Signature / # DATE 2/14/97 (407) 695-8699
Phone