1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

1. Corporation Name

DEEP CREEK GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 25100 SANDHILL BLVD. X-104 252 WEST MARION AVENUE PORT CHARLOTTE FL 33983

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

% DAVID K. OAKS 252 WEST MARION AVENUE PUNTA GORDA FL 33950

26 25100 Sandhill Blvd.

## FILED Aug 24, 1999 8:00 am Secretary of State

08-24-1999 90002 038 \*\*\*\*61.25





Applied For

Date Incorporated or Qualified 06/27/1986

4. FEI Number

Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	A	pplied For	
22		27	X10	14	59-2709278	<u> </u>   N	lot Applicable	
City & State		City & State			5. Certificate of Status Desired	\$8.75 Additional		
23 28		8 Port Charlotte, FL		FT.		Fee F	Required	
Zip					5 Floation Compaign Financing	\$5.00	May Be	
24	25	29 33983 30	USA		Trust Fund Contribution		to Fees	
	9. Name and Address of Current I				10. Name and Address of New Registered A	gent		
				81 Name				
OAKS. DAVID K.				and the state of t				
252 WEST MARION AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
PUNTA GORDA:FL:33950 ::				83				
PONTA GONDA:FE33990 ま。 文献 子様ではよるできます								
	•		84	City	FL	85 Zip	Code	
44 5	(17) for	and 617 1509. Florido Statutos	the above	named		nanging it	s registered	
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 a		gistered Agen	t signature n	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	OPS IN 12	
12.	OFFICERS AND	DIRECTORS				Change		
TITLE	VD	PADELETE	1.1 TITLE		D	□ Change	A. A. A. Gallian	
NAME	HUNT, DONN		1.2 NAME		Johanna Finn			
STREET ADDRESS	25100 SANDHILL BLVD V204	1.3 S		ADDRESS	Toron Sandhill Sivot No.	204		
CITY-ST-ZIP	PUNTA GORDA FL		1.4 CITY-S1	r-ZIP	Pt. Charlotte, FL 33983			
TITLE	TD	☐ DELETE	2.1 TITLE		SD	Change	Addition	
NAME	STAIANO, FRED	2.2 N			Nina Puopolo		1	
STREET ADDRESS	25100 SANDHILL BLVD D103 23		2.3 STREET	23 STREET ADDRESS 25100 Sandhill Blvd. #R202				
CITY-ST-ZIP	PORT CHARLOTTE FL		2.4 CITY-S	T-ZIP	Pt. Charlotte, FL 33983			
TITLE	D	☐ DELETE	3.1 TITLE			Change	: Addition	
NAME	PROKOS, BETTY		3.2 NAME					
STREET ADDRESS	25100 SANDHILL BLVD, #J-201		3.3 STREET	ADDRESS	8			
CITY-ST-ZIP	PORT CHARLOTTE FL 33983		3.4. CITY-S	T-71P				
TITLE	P	☐ DELETE	4.1 TIFLE			Change	Addition	
NAME	RAO, MICHAÉL	;	4. 2 NAME		,			
STREET ADDRESS	25100 SANDHILL BLVD T102	<b>I</b> *		ADDRESS				
	PUNTA GORDA FL		4.4 CITY-S					
CITY-ST-ZIP TITLE	D D	☐ DELETE	5.1 TITLE	- ZIF		Change	Addition	
	LUCIANO, MADELYN		5.2 NAME				_	
NAME	25100 SANDHILL BLVD, P-204		5.3 STREET	ADORESS				
STREET ADDRESS	PORT CHARLOTTE FL		5.4 CITY-S					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	-217		Change	Addition	
TITLE	D DIDOU ED	□ nerete	6.2 NAME		VPD	-X onongo	, addition	
NAME	BIRCH, ED		=	4000000	,			
STREET ADDRESS	25100 SANDHILL BLVD, R-201		6.3 STREET				ļ	
CITY-ST-ZIP	CPUNTA GORDA FL		6.4 CITY-S	1-21P				

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: