

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27333

FILED  
Jan 18, 2009  
Secretary of State

Entity Name: DEER RUN HOMEOWNERS ASSOCIATION #18, INC.

**Current Principal Place of Business:**

296 SAXONY COURT  
WINTER SPRINGS, FL 32708 US

**New Principal Place of Business:**

**Current Mailing Address:**

296 SAXONY COURT  
WINTER SPRINGS, FL 32708 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STELL, MARK  
261 SAXONY CT.  
WINTER SPRINGS, FL 32708 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: PD ( ) Delete  
Name: STELL, MARK  
Address: 261 SAXONY CT.  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD ( ) Delete  
Name: CHRISTINE FERM,  
Address: 296 SAXONY COURT  
City-St-Zip: WINTER SPRINGS, FL

Title: VD ( ) Delete  
Name: FAZLAR, ALI  
Address: 280 SAXONY CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: DEATON, JOHN  
Address: 297 SAXONY CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD ( ) Delete  
Name: WILLIAMS, JENNY  
Address: 268 SAXONY CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D (X) Delete  
Name: ANTAYA, GEORGE  
Address: 265 SAXONY CT.  
City-St-Zip: WINTER SPRINGS, FL 32708

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ANTAYA, GEORGE  
Address: 265 SAXONY CT.  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CHRISTINE FERM

TD

01/18/2009

Electronic Signature of Signing Officer or Director

Date