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Apr 23 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 # N29568 (5)

1. Corporation Name

DEER CREEK COMMUNITY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

16 CHURCH ST
~~1001 E. BAY STREET~~
OSPREY FL 34229

16 CHURCH ST
~~1001 E. BAY STREET~~
OSPREY FL 34229-9349



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
12/06/1988

3a. Date of Last Report
04/17/1996

4. FEI Number
65-0104143

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

10. Name and Address of New Registered Agent

LIGHTHOUSE MANAGEMENT & REALTY
16 CHURCH ST
OSPREY FL 34229

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 (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, familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Lloyd Keith, Ass't Sec.*

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

(NOTE: Registered Agent signature required when reinstating)

4/13/97

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SUPRINA, DR. RICHARD
4728 WHITE TAIL LANE
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CUFFARO, JOSEPH
8459 WOODBRIAR DRIVE
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
LANTHER, MIRIAM E.
4750 ANTLER TRAIL
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
KALBERMAN, HARRY
8142 SHADOW PINE WAY
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ROCCA, JOHN
4712 WHITE TAIL LN
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CUNNINGHAM, JACK
4815 DEER TRAIL BLVD
SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
VD
Mark Mason
8400 Woodbriar Dr.
Sarasota, FL. 34238

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
SD
Russell White
8572 Woodbriar Dr.
Sarasota, FL. 34238

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
TD
Fred Doery
8575 Woodbriar Dr.
Sarasota, FL 34238

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
D
Robert Bell
8482 Cypress Hollow Dr.
Sarasota, FL. 34238

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
D
Susan Keal
8253 Shadow Pine Way
Sarasota, FL. 34238

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
D
John Van Schoor
8539 Woodbriar Dr.
Sarasota FL. 34238

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 *Lloyd Keith, Ass't Sec.*

4-13-97

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CR2E037 (9/96)