

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90130 047 ****61.25

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DOCUMENT # N29568 1. Entity Name DEER CREEK COMMUNITY ASSOCIATION, INC.					
Principal Place of Business C/O ADVANCED MGMT INC OF SW FLORIDA 9031 TOWN CENTER PARKWAY BRADENTON, FL 34202 US			Mailing Address C/O ADVANCED MGMT INC OF SW FLORIDA 9031 TOWN CENTER PARKWAY BRADENTON, FL 34202 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0104143	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ADVANCED MANAGEMENT OF SW FLORIDA INC 9031 TOWN CENTER PKWY SUITE #107 BRADENTON, FL 34202				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADDICOTT, JERRY 4517 DEER CREEK BLVD SARASOTA, FL 34238 <input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAUGAARD, JORGEN 8347 CYPRESS HOLLOW DR SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MEIJER, RON 8133 SHAWDOW PINE WAT SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMAS, FREY 4739 WHITE TAIL LANE SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD POWER, CLAIRE 4487 WHITE EGRET LN SARASOTA, FL 34238 <input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, JACK 4565 DEER CREEK BLVD SARASOTA, FL 34238 <input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Howard Pascoe 8335 Shadow Pine Way Sarasota, FL 34238 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Robert Krug 4529 Deer Creek Blvd. Sarasota, FL 34238 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Beverly Rethig 8541 Woodbriar Dr. Sarasota, FL 34238 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
12. 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 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: <u>Robert H. Krug</u> Robert H. Krug <u>3/16/05 (941) 927-5062</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					