

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35154

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: DEER RUN OF PALM VIEW HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5914-22ND AVENUE DR E.  
PALMETTO, FL 34221 US

**New Principal Place of Business:**

6021 22ND AVE CIR E  
PALMETTO, FL 34221 US

**Current Mailing Address:**

5914-22ND AVENUE DR E.  
PALMETTO, FL 34221 US

**New Mailing Address:**

6021 22ND AVE CIR E  
PALMETTO, FL 34221 US

FEI Number: 65-0219755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PETROSKY, PAM  
5914-22ND AVENUE DR. E  
PALMETTO, FL 34221 US

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

HOWISON, SHARON  
6021 22ND AVE CIR E  
PALMETTO, FL 34221 US

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: SHARON HOWISON

02/28/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAMILTON, KAREN  
Address: 5922 22ND AVE DR. E  
City-St-Zip: PALMETTO, FL 34221

Title: VD ( ) Delete  
Name: PETROSKY, RANDY  
Address: 5914-22ND AVENUE DRIVE E.  
City-St-Zip: PALMETTO, FL 34221

Title: STD ( ) Delete  
Name: PETROSKY, PAM  
Address: 5914-22ND AVENUE DRIVE E  
City-St-Zip: PALMETTO, FL 34221

Title: STDC ( ) Delete  
Name: GOATCHER, PENNY  
Address: 5911 22ND AVE DR. E  
City-St-Zip: PALMETTO, FL 34221

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

Title: PD (X) Change ( ) Addition  
Name: SANDERS, CHAD  
Address: 6019 22ND AVE CIR E  
City-St-Zip: PALMETTO, FL 34221

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

Title: STD (X) Change ( ) Addition  
Name: HOWISON, SHARON  
Address: 6021 22ND AVE CIR E  
City-St-Zip: PALMETTO, FL 34221

Title: STDC (X) Change ( ) Addition  
Name: HOWISON, SHARON  
Address: 6021 22ND AVE CIR E  
City-St-Zip: PALMETTO, FL 34221

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHAD SANDERS

PD

02/28/2005

Electronic Signature of Signing Officer or Director

Date