2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N35154



Apr 21, 2003 8:00 am Secretary of State

FILED

04-21-2003 90357 017 ****61.25

1. Entity Name			
DEER RUN OF PALM VIEW	HOMEOWNERS	ASSOCIATION,	IN



Principal Place of Business 6033 22ND AVE CIR E PALMETTO FL 34221 US

Mailing Address 6033 22ND AVE CIR E PALMETTO FL 34221 US

2. Principal Place of Business

3. Mailing Address



CHECK HERE IF MAKING CHANGES

Not Applicable Name and Address of Name and Address of Current Registered Agent Name											٦
KING, ERIN ACCIDENT AGAINST AND AVECIRE PALMETTO FL 34221 Siren Address (P.O. Box Number is Not Acceptable) FL	City & State	th. FL	2 /22/	Pra/meth	FL	4. FEI Num	ber 65-0219755				}
KING, ERIN ACCIDENT AGAINST AND AVECIRE PALMETTO FL 34221 Siren Address (P.O. Box Number is Not Acceptable) FL	Zip 3422	21		3422 ₁	Country USA	5. Certifica	te of Status Desired				
KING, ERIN 6033 22ND AVE CIR E PALMETTO FL 34221 8. The above named ontity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with, and accept the obligators of registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of Florida. Tam families with and accept the registered agent, or both, in the State of F		6. Name and	Address of Current R	egistered Agent	75.5	ラーーマー7. ·Name a	nd Address of New F	Registered Ag	ent		1
B. 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 accopt the obligations of registered agent. SIGNATURE Signature, typed or pinted rame of registered agent. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 UNITE. WUTTE, R. BRUCE STREET ADDRESS BO27 22VD AVE CIRCLE E OTY-ST-2P PALMETTO FL 34221 TILE STD MAKE BROWNELL LORETTA STD MAKE STREET ADDRESS GOTY-ST-2P PALMETTO FL 34221 TILE STD MAKE STREET ADDRESS GOTY-ST-2P PALMETTO FL 34221 TILE MAKE STREET ADDRESS GOTY-ST-2P TILE MAKE STREET ADDRESS GOTY-ST-2P PALMETTO FL 34221 TILE MAKE STREET ADDRESS GOTY-ST-2P Change Addition Change Addition Change Addition Addition Change Change Addition Change Addition Change Change Change Change Addition Change	6033 22ND AVE CIR E			Street A	Street Address (P.O. Box Number is Not Acceptable) 5914—22ND ALENUE DR., E.						
SIGNATURE SIGNAT					City	PALMETTO	4	FL	342	2/	
SIGNATURE				the purpose of changing its re	gistered office or	registered agent, or b	ooth, in the State of Fl	orida. I am fan	niliar with,	and accept	
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 WITT, R. BRUCE SIRECT ADDRESS CITY-51-2P PALMETTO FL 34221 TITLE NAME SIRECT ADDRESS CITY-51-2P TITLE NAME SIRECT ADDRESS CITY-51-	SIGNATURE .	z Pan	ula Pet	ioskou	<u>.</u>		ж.	4-15	-ø3	·	
Trust Fund Contribution. Added to Fees Florida Department of State		Signature, typed or pri	nted name of registered agent ar	nd title if applicable. (NOTE: F	Registered Agent signati	ure required when reinstating)	, ,	DATE			
TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition	- F	FILE NOW: F	EE IS \$61.25	· ·			, 56		-		
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Thereby certify that the information supplied with this fining does not quality 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.

4-15-03