

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48670

FILED
Apr 26, 2012
Secretary of State

Entity Name: DEERFIELD POINTE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

286 FAWN RIDGE LANE
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

7400 BAYMEADOWS WAY
SUITE 317
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-3142442 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS
7400 BAYMEADOWS WAY SUITE 317
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS
7400 BAYMEADOWS WAY
SUITE 317
JACKSONVILLE, FL 32256 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: _____

Electronic Signature of Registered Agent

04/26/2012

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: WAGNER, CHARLES
Address: 7400 BAYMEADOWS WAY, SUITE 317
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP
Name: ALLEN, ANDY
Address: 7400 BAYMEADOWS WAY, SUITE 317
City-St-Zip: JACKSONVILLE, FL 32256

Title: TREA
Name: DEHART, MICHAEL
Address: 7400 BAYMEADOWS WAY, SUITE 317
City-St-Zip: JACKSONVILLE, FL 32256

Title: SECY
Name: ALLEN, ANDY
Address: 7400 BAYMEADOWS WAY, SUITE 317
City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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 all other like empowered.

SIGNATURE: CHARLES WAGNER

Electronic Signature of Signing Officer or Director

PRES

04/26/2012

Date