

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 15, 2005  
Secretary of State**

DOCUMENT# N99000003878

Entity Name: DEERWOOD COUNTRY CLUB, INC.

**Current Principal Place of Business:**

10239 GOLF CLUB DRIVE  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

10239 GOLF CLUB DRIVE  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-3586713      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDCOLAW, INC.  
6 EAST BAY STREET  
SUITE 500  
JACKSONVILLE, FL 32202 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KATTMAN, JOHN  
Address: 8186 BLUE JAY LANE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: S ( ) Delete  
Name: GRIFFIN, TAD  
Address: 1 INDEPEND DR., #1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: IPP ( ) Delete  
Name: TAYLOR, BRUCE  
Address: 8343 HOLLYRIDGE ROAD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Delete  
Name: CANGEMI, JOHN DR.  
Address: 7551 HOLLY RIDGE ROAD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: T ( ) Delete  
Name: HELQUIST, ED  
Address: 7894 HUNTERS GROVE ROAD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: JOHN, CANGEMI  
Address: 7551 HOLLYRIDGE RD.  
City-St-Zip: JACKSONVILLE, FL 32256

Title: S (X) Change ( ) Addition  
Name: WEILAND, BOB  
Address: 8009 OAK HAMMOCK CT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: IPP (X) Change ( ) Addition  
Name: KATTMAN, JOHN  
Address: 8186 BLUE JAY LANE  
City-St-Zip: JACKSONVILLE, FL 32256

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

Title: T (X) Change ( ) Addition  
Name: ROWLEY, MICHAEL  
Address: 7852 WOODSDALE RD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP ( ) Change (X) Addition  
Name: HELQUIST, ED  
Address: 7894 HUNTERS GROVE RD  
City-St-Zip: JACKSONVILLE, FL 32256

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: JOHN CANGEMI

P

04/15/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date