

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90021 024 ****61.25

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**

94021027



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01122004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0104143

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ADVANCED MANAGEMENT OF SW FLORIDA INC
9031 TOWN CENTER PKWY
SUITE #107
BRADENTON, FL 34202**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☒ Delete
NAME **SPAY, MARY ANN D**
STREET ADDRESS **8395 CYPRESS HOLLOW DR**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **PD** ☐ Change ☒ Addition
NAME **Jerry Addicott**
STREET ADDRESS **4517 Deer Creek Blvd.**
CITY-ST-ZIP **Sarasota, FL 34238**

TITLE **D** ☐ Delete
NAME **GRAUGAARD, JORGEN**
STREET ADDRESS **8347 CYPRESS HOLLOW DR**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Delete
NAME **ULRICH, GEORGE**
STREET ADDRESS **4472 DEER TRAIL BLVD**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **SD** ☐ Change ☒ Addition
NAME **Ron Meijer**
STREET ADDRESS **8133 Shadow Pine Way**
CITY-ST-ZIP **Sarasota, FL 34238**

TITLE **TD** ☐ Delete
NAME **THOMAS, FREY**
STREET ADDRESS **4739 WHITE TAIL LANE**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **VALENTINO, GRACE**
STREET ADDRESS **8224 SHADOW PINE WAY**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **VPD** ☐ Change ☒ Addition
NAME **Claire Power**
STREET ADDRESS **4487 white Egret Ln.**
CITY-ST-ZIP **Sarasota, FL 34238**

TITLE **D** ☒ Delete
NAME **SARGEANT, CHUCK**
STREET ADDRESS **8687 WOODBRIDGE DE**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **D** ☐ Change ☒ Addition
NAME **Jack Sullivan**
STREET ADDRESS **4565 Deer Creek Blvd.**
CITY-ST-ZIP **Sarasota, FL 34238**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #