

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 753374

1. Entity Name

DEER RUN COMMUNITY ASSOCIATION, INC.



FILED

06 FEB 13 AM 9:12

REINSTATEMENT 05-06
T. Roberts FEB 17 2005

Space Coast Property Management
645 Classic Court, Suite 104
Melbourne, FL 32940

Space Coast Property Management
645 Classic Court, Suite 104
Melbourne, FL 32940



City & State		City & State		4. FEI Number 59-2256985		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPACE COAST PROPERTY MGMT. 1017 COOLING AVE. MELBOURNE, FL 32935				7. Name and Address of New Registered Agent Name: Space Coast Property Management Street Address (P.O. Box Number is Not Acceptable): 645 Classic Court #104 City: melbourne FL Zip Code: 32940			
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: <i>[Signature]</i> Signature, typed or printed name of registered agent and title if applicable.				900066370209 02/22/06--01020--02/10/06 DATE			
FILE NOW!!! FEE IS \$236.25 After January 1, 2006, Fee will be \$297.50				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SPACCIO, LOU 8519 TROUT AVE. PALM BAY, FL 32909	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Frank Bruggerman 357 Deer Run Road Palm Bay, FL 32909	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BUTTS, JIM 194 CAVALIER ST. PALM BAY, FL 32909	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Tammy Watts 151 Eber Rd #608 Melbourne, FL 32901	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUGGERMAN, FRANK 357 DEER RUN RD. PALM BAY, FL 32909	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Harry Vadney 349 Stallion Street Palm Bay, FL 32901	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATTS, KATHY 151 EBER RD., #608 MELBOURNE, FL 32901	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP William Black 287 Cavalier St Palm Bay, FL 32901	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bob Schmitt 179 Cavalier Street Palm Bay, FL 32901	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Watts 8435 Antelopes Ave Palm Bay, FL 32909	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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: <i>Tammy Watts</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				12/26/2005 Date			
				321-432-8871 Daytime Phone #			