

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702445

FILED
Feb 25, 2009
Secretary of State

Entity Name: THE DEAUVILLE INC.

Current Principal Place of Business:

3215 SE 10TH ST
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

3215 SE 10TH ST
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-0951676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OPARA, PEGGY D
3215 SE 10TH ST, #202
POMPANO BEACH, FL 33062 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: D () Delete
Name: ANTHONY, DAVID
Address: 4371 STONEY RIDGE RD
City-St-Zip: AVON, OH 44011

Title: VP () Delete
Name: HORN, DIANE
Address: 3215 SE 10 STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: SHERMAN, MARY ANN
Address: 6557 WINDSOR DR
City-St-Zip: PARKLAND, FL 33067

Title: P () Delete
Name: PERKINS, WAYNE
Address: 3215 SE 10TH ST #208
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD () Delete
Name: RICK, CAROL
Address: 30008 CINNAMON WAY
City-St-Zip: NORTH OLMSTED, OH 44070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JENNINGS, RICH D
Address: 3215 SE 10 STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP (X) Change () Addition
Name: HORN, DIANE VP
Address: 3215 SE 10 STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: T (X) Change () Addition
Name: SHERMAN, MARY ANN T
Address: 6557 WINDSOR DR
City-St-Zip: PARKLAND, FL 33067

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

Title: SD (X) Change () Addition
Name: RICK, CAROL SD
Address: 30008 CINNAMON WAY
City-St-Zip: NORTH OLMSTED, OH 44070

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WAYNE PERKINS

PRES

02/25/2009

Electronic Signature of Signing Officer or Director

Date