2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N04000000728

Entity Name: DEERFIELD PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 84-1636378 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD ( ) Delete
Name: BARKLEY, GLENN
Address: 255 DOE RUN DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: VPD ( ) Delete
Name: RANK, ROGER
Address: 132 DOE RUN DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD ( ) Delete
Name: BAMFORD, BRAD
Address: 360 SPRINGS LEAP CIR
City-St-Zip: WINTER GARDEN, FL 34787

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GOLDMAN, HOWARD
Address: 349 SPRING LEAP CIR
City-St-Zip: WINTER GARDEN, FL 34787

Title: VPD (X) Change ( ) Addition
Name: BOWCOCK, LARRY
Address: 231 DOE RUN DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD (X) Change ( ) Addition
Name: WILLIAMS, DEBRA
Address: 108 DOE RUN DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Change (X) Addition
Name: WOLNIAKOWSKI, KATHY
Address: 121 DOE RUN DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Change (X) Addition
Name: BAIJNAUTH, JAINARINE
Address: 232 SPRING LEAP CIR
City-St-Zip: WINTER GARDEN, FL 34787

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: HOWARD GOLDMAN PD 03/25/2009

Electronic Signature of Signing Officer or Director — Date