

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756836

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** VILLAS OF DEERWOOD HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15600 SW 288 STREET  
STE #406  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HARBOR MANAGEMT SVCS  
P O BOX 924176  
HOMESTEAD, FL 33092 US

**New Mailing Address:**

**FEI Number:** 59-2144674

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSOCIATION LAW GROUP  
1666 KENNEDY CAUSEWAY  
SUITE 305  
NORTH BAY VILLAGE, FL 33141 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:** VPD  
**Name:** MONTERO, ALBERT  
**Address:** 15600 SW 288 STREET, #406  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** PD  
**Name:** THOMPSON, ROBERT  
**Address:** 15600 SW 288 STREET, #406  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** SD  
**Name:** LATHAM, GLORIA  
**Address:** 15600 SW 288 STREET, #406  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** TD  
**Name:** WILLOUGHBY, STEVE  
**Address:** 15600 SW 288 STREET, #406  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** D  
**Name:** BOADA, GABRIEL  
**Address:** 15600 SW 288 STREET, #406  
**City-St-Zip:** HOMESTEAD, FL 33033

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT THOMPSON

PD

04/02/2012

Electronic Signature of Signing Officer or Director

Date