2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 755212

1. Entity Name

DEERWOOD TOWNHOMES ASSOCIATION, INC.

				OO WE THE				
Principal Place of Business 15600 SW 288 STREET STE 406 HOMESTEAD FL 33033		Mailing Address C/O HARBOR MANAGEMENT SERVICES P.O. BOX 924176 HOMESTEAD FL 33092-4176			er er er er Folgring older tiget had bladt	8/8// 8/8// 8/8// 8/8/	II e joji j ec i	
2. Principal Place of Business 3.		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		·· ·	4. FEI Number 59-2062953		<u> </u>	plied For
Zip Country		Zip	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			litional
	6. Name and Address of Current	Registered Agent	red Agent		7. Name and Address of New Registered Agent			
				Name				
VAN HOOK, RAYMOND D C/O HARBOR MANAGEMENT SERVICES INC.				Street Address (P.O. Box Number is Not Acceptable)				
	OUTH DIXIE HWY #207 (1) EAD FL 33032						Zip Code	9
						the State of Florida. I a		
the obligat . SIGNATURE .	ions of registered agent.	and title if applicable. (NOT	E: Registered	Agent signature require	ed when reinstating)	DAT	E	
J	FILE NOW: FEE IS \$61,25	I	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 DIF	RECTORS 1	11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	10
TITLE	SD	Delete	TITLE	Seci	re:tary		☐ Change	Addition
NAME	ADAMS, ROSEMARY		NAME	Son	ndra Davis	cacle of ace	MOTH	
STREET ADDRESS	15077 SW 127 COURT		STREET	address (1501	10 200 197 c	jecle piace		ļ
CITY-ST-ZIP	MIAMI FL 33186		CITY-S	ST-ZIP MYN	amı Fl 33	ଅନ୍ତେ	•	
TITLE	VPD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	ROSENTHAL, ELI		NAME			•		
STREET ADDRESS	12719 SW 150 TERRACE		STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33186		CITY-S	IT-ZIP				
TITLE	PD	☐ Delete	TITLE			- · · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME	WOITKE, KEVIN		NAME					
STREET ADDRESS	15141 SW 127 CT		STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33186		CITY-S	ST-ZIP				
TITLE	T	☐ Delete	TITLE	1			Change	Addition
NAME	JURGENSMIER, DONALD		NAME					
STREET ADDRESS	12733 SW 150 TERRACE		STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33186		CITY-S	ST-ZIP				
TITLE	D	☐ Delete	TITLE			TARET .	☐ Change	☐ Addition
NAME	BOOKER, BEVERLY		NAME					_
STREET ADDRESS	15080 SW 127 COURT			ADDRESS				ļ
CITY-ST-ZIP	MIAMI FL 33186		CITY-S	l I				ţ
TITLE .	Maruell I L 00100	☐ Delete	TITLE				☐ Change	Addition
NAME		LI Delete	NAME					
				ADDRESS				

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

KAKTURE REJUBLINE OVATRE - president 02/12/03

305-328-9285

FILED

Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90212 032 ****70.00