## 2003 NOT-FOR-PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # **N29023**

## **FILED** May 05, 2003 8:00 am § Secretary of State

| 1. Entity Nam<br>DEER CR   |  | age homeowni  | ERS' ASS               | OCIATION, INC   | С.   |                  |                          |  | 05-05-200              | 3 92198         | 037 ****6                                 | 51.25                  |                 |  |
|--|--|---|------------------------|---|--|------------------|--------------------------|--|------------------------|-----------------|---|------------------------|-----------------|--|
| Principal Place of Business 2180 W. STATE ROAD 434, SUITE #5000 LONGWOOD FL 32779  |  |   | 2180 V                 | Mailing Address 2180 W. STATE ROAD 434. SUITE #5000 LONGWOOD FL 32779 |  |                  |                          | i innii (4) d  | 2 N.W. + D.II.L ##11## | (ban tou Billiu | Oldii bidit al Fti                        | <b>21611 616</b> 11 11 | 1=1             |  |
| 2. Principal F   | Place of Busin   | ess   | 3. Mai                 | ling Address  |  |                  |                          |  |                        |                 |   |                        |                 |  |
| Suite, Apt. #, etc.  |  |   | Su                     | Suite, Apt. #, etc.   |  |                  |                          | ☐ CHECK HERE IF MAKING CHANGES   |                        |                 |   |                        |                 |  |
| City & State   |  |   | Ci                     | City & State  |  |                  |                          | 4. FEI Number <b>59-2914671</b> Applied Fo   |                        |                 |   |                        |                 |  |
| Zip  |  | Country   | Ziş                    | 0   | Cou  | untry            |                          | 5. Certificate o   | f Status Desired       | d 🗆             | \$8.75 /                                  | Additional             | OGD TO          |  |
| 6. Name and Address of Current Ro  |  |   | ent Registere          | egistered Agent   |  |                  | 7. Name and Address of I |  |                        |                 |   |                        |                 |  |
| LADT IA  | MES W., JI   |   |                        |   |  | Name             |                          |  |                        | ·               |   | ·                      | - ~~w .         |  |
| 2180 W.  |  | ND 434, SUITE #500  | 00                     |   |  | Street Ac        | ddress (P.               | O. Box Number  | is Not Accepta         | ble)            |   |                        |                 |  |
| LONGING  |  | 18  |                        |   |  | City             |                          |  | <del></del>            | F               | Zip C                                     | ode                    |                 |  |
|  | named entity   | y submits this statemen   | nt for the purp        | ose of changing its   | registere  | ed office or     | registere                | d agent, or both   | in the State of        |                 |   | th, and ac             | cept            |  |
| the obligat  | nons or regist   | ered agent.   |                        |   |  |                  |                          |  |                        |                 |   |                        |                 |  |
| SIGNATURE.   |  | or printed name of registered a   | egent and title if app | olicable. (NOT  | E: Registere   | d Agent signatur | re required w            | then reinstating)  |                        | DATI            |   |                        | -               |  |
| FILE MANY FEE 19 April 29  |  |   |                        |   |  |                  |                          | •  |                        |                 |   |                        |                 |  |
|  | FILE NOW   | : FEE IS \$61.25  |                        | 9. Election Car<br>Trust Fund (                                       | mpaign F   | inancing         |                          | \$5.00 May Be<br>Added to Fees   |                        |                 | eck Payab<br>artment o                    |                        |                 |  |
| 10.  |  | : FEE IS \$61.25  | DIRECTORS              | Trust Fund (  | mpaign F   | inancing         | ;                        | \$5.00 May Be  | Flo                    | rida Dep        | artment o                                 | f State                |                 |  |
| 10.  | PD   | OFFICERS AND  | DIRECTORS              | Trust Fund (  | mpaign F<br>Contributi   | inancing on.     | ;                        | \$5.00 May Be<br>Added to Fees   | Flo                    | rida Dep        | artment o                                 | f State                | ddition         |  |
| 10.  | PD<br>HAMMONI  | OFFICERS AND  | DIRECTORS              | Trust Fund (  | mpaign F<br>Contributi<br>11.  | inancing on.     | ;                        | \$5.00 May Be<br>Added to Fees   | Flo                    | rida Dep        | DIRECTORS                                 | f State                | ddition         |  |
| 10.<br>TITLE<br>NAME   | PD<br>HAMMONI<br>5506 DON<br>ORLANDO   | OFFICERS AND<br>D, CHRIS<br>NELLY CIRCLE  | DIRECTORS              | Trust Fund (  | mpaign F<br>Contributi<br>11.<br>TITLE<br>NAM  | inancing on. [   | A                        | \$5.00 May Be<br>Added to Fees   | Flo                    | rida Dep        | DIRECTORS Chang                           | f State  in 10  e    A | ddition         |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>HAMMONI<br>5506 DON<br>ORLANDO<br>D  | OFFICERS AND<br>O, CHRIS<br>NELLY CIRCLE<br>FL 32821  | DIRECTORS              | Trust Fund (  | mpaign F<br>Contributi<br>11.<br>TITLE<br>NAM<br>STRE<br>CITY  | inancing on. [   | AI                       | \$5.00 May Be<br>Added to Fees   | FIG                    | rida Dep        | DIRECTORS                                 | f State  in 10  e    A | 1001            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>HAMMONI<br>5506 DON<br>ORLANDO<br>D<br>KNEESSI,  | OFFICERS AND<br>O, CHRIS<br>NELLY CIRCLE<br>FL 32821  | DIRECTORS              | Trust Fund (  | mpaign F Contributi  11. TITLE NAMI STRE CITY TITLE NAM  | inancing on. [   | AI                       | \$5.00 May Be<br>Added to Fees   | FIG                    | rida Dep        | DIRECTORS Chang                           | f State  in 10  e    A | 1001            |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PD<br>HAMMONE<br>5506 DON<br>ORLANDO<br>D<br>KNEESSI,<br>5027 DELV<br>ORLANDO  | OFFICERS AND<br>O, CHRIS<br>NELLY CIRCLE<br>FL 32821<br>DENNIS<br>IN COURT  | DIRECTORS              | Trust Fund (  | mpaign F Contributi  11. TITLE NAMI STRE CITY TITLE NAM STRE   | inancing on. [   | レアし<br>Kne               | \$5.00 May Be<br>Added to Fees   | FIG                    | rida Dep        | DIRECTORS Chang                           | f State  IN 10 e       | ddition         |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE  | PD<br>HAMMONI<br>5506 DON<br>ORLANDO<br>D<br>KNEESSI,<br>5027 DELV<br>ORLANDO<br>VPD   | OFFICERS AND<br>D, CHRIS<br>NELLY CIRCLE<br>FL 32821<br>DENNIS<br>/IN COURT<br>FL 32821   | DIRECTORS              | Trust Fund (  | mpaign F Contributi  11. TITLE NAM STRE CITY TITLE OTY TITLE   | inancing on. [   | レアし<br>Kne               | \$5.00 May Be<br>Added to Fees<br>DDITIONS/CHAI  | FIGURES TO OFFI        | rida Dep        | DIRECTORS Chang                           | f State  in 10  e    A | ddition         |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>HAMMONI<br>5506 DON<br>ORLANDO<br>D<br>KNEESSI,<br>5027 DELV<br>ORLANDO<br>VPD<br>STEIN, DE  | OFFICERS AND D, CHRIS NELLY CIRCLE FL 32821  DENNIS //IN COURT FL 32821  BORAH  | DIRECTORS              | Trust Fund (  | mpaign F Contributi  11. TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM   | inancing on. [   | レアし<br>Kne               | \$5.00 May Be<br>Added to Fees<br>DDITIONS/CHAI  | FIGURES TO OFFI        | rida Dep        | DIRECTORS Chang                           | f State  IN 10 e       | ddition         |  |
| 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | PD HAMMONI 5506 DON ORLANDO D KNEESSI, 5027 DELV ORLANDO VPD STEIN, DE 5525 DELA   | OFFICERS AND D, CHRIS NELLY CIRCLE FL 32821  DENNIS /IN COURT FL 32821  BORAH ANO LANE  | DIRECTORS              | Trust Fund (  | mpaign F Contributi  11. TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE  | inancing on. [   | レアし<br>Kne               | \$5.00 May Be<br>Added to Fees<br>DDITIONS/CHAI  | FIGURES TO OFFI        | rida Dep        | DIRECTORS Chang                           | f State  IN 10 e       | ddition         |  |
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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: