

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29568

Entity Name: DEER CREEK COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**C/O ADVANCED MGMT INC OF SW FLORIDA
9031 TOWN CENTER PARKWAY
BRADENTON, FL 34203**Current Mailing Address:**C/O ADVANCED MGMT INC OF SW FLORIDA
9031 TOWN CENTER PARKWAY
BRADENTON, FL 34203**FEI Number:** 65-0104143**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADVANCED MANAGEMENT OF SW FLORIDA INC
9031 TOWN CENTER PKWY
BRADENTON, FL 34203 US*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

Officer/Director Detail :

Title VP
Name SOKOLIK, GREG
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title ASST. SECRETARY
Name WILSON, MAT D
Address 9031 TOWN CENTER PKWY
City-State-Zip: BRADENTON FL 34202

Title PRESIDENT
Name FLEISCHER, ERIC
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name WHITE, LEAH
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name SHOEMAKER, CHUCK
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title SECRETARY
Name SMITH, MICHELLE
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name HEMMERLEIN, CALEB
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name WOODS, JAMES
Address C/O ADVANCED MGMT INC OF SW
FLORIDA
9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Continues on page 2

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: MAT D WILSON

AS

03/11/2024

Officer/Director Detail Continued :

Title TREASURER
Name ARMENTROUT, TERRY
Address C/O ADVANCED MGMT INC OF SW FLORIDA
 9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name WILLIAMS, TOM
Address C/O ADVANCED MGMT INC OF SW
 FLORIDA
 9031 TOWN CENTER PARKWAY
City-State-Zip: BRADENTON FL 34203