

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001646

**Entity Name:** DEAN WOODS HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 29, 2015**  
**Secretary of State**  
**CC8917453832**

**Current Principal Place of Business:**

4407 VINELAND RD  
STE D15  
ORLANDO, FL 32811

**Current Mailing Address:**

4407 VINELAND RD  
STE D15  
ORLANDO, FL 32811 US

**FEI Number: 59-3539705**

**Certificate of Status Desired: No**

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

EPM SERVICES  
4407 VINELAND RD  
STE D15  
ORLANDO, FL 32811 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: BRAD VAN ROOYEN**

**04/29/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name MCKINNON, KEVIN  
Address 4407 VINELAND RD  
STE D15  
City-State-Zip: ORLANDO FL 32811

Title VPSD  
Name REYES, LILLIAN  
Address 4407 VINELAND RD  
STE D15  
City-State-Zip: ORLANDO FL 32811

Title TD  
Name WILLIAMSON, AMANDA  
Address 4407 VINELAND RD  
STE D15  
City-State-Zip: ORLANDO FL 32811

Title D  
Name GOMEZ, PASCUAL JR.  
Address 4407 VINELAND RD  
STE D15  
City-State-Zip: ORLANDO FL 32811

Title DIRECTOR  
Name PEREZ, CASSANDRA  
Address 4407 VINELAND RD  
STE D15  
City-State-Zip: ORLANDO FL 32811

*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: PASCUAL GOMEZ**

**PRESIDENT**

**04/29/2015**

Electronic Signature of Signing Officer/Director Detail

Date