

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

DOCUMENT# N99000001461

**Entity Name:** DEER CREEK LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

120 SW WHITETAIL CIRCLE  
LAKE CITY, FL 32024

**Current Mailing Address:**

P O BOX 2344  
LAKE CITY, FL 32056

**FEI Number:** 59-3582936

**Certificate of Status Desired:** No

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

HICKS, SHIRRELL L  
120 SW WHITETAIL CIRCLE  
LAKE CITY, FL 32024 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 DIRECTOR  
Name WATKINS, HARRY  
Address 710 SW WHITETAIL CIRCLE  
City-State-Zip: LAKE CITY FL 32024

Title DIRECTOR  
Name WILSON, WILLIAM  
Address 120 SW HUCKLEBERRY CT  
City-State-Zip: LAKE CITY FL 32024

Title SECRETARY/TREASURER  
Name HICKS, SHIRRELL L  
Address 120 SW WHITETAIL CIR  
City-State-Zip: LAKE CITY FL 32024

Title DIRECTOR  
Name TURNER, THEODORE  
Address 606 SW WHITETAIL CIR  
City-State-Zip: LAKE CITY FL 32024

Title VP  
Name UNDERWOOD, CHERYL  
Address 675 SW WHITETAIL CIRCLE  
City-State-Zip: LAKE CITY FL 32024

Title PRESIDENT  
Name ANDERSON, WAYNE H  
Address 130 SW TREY WAY  
City-State-Zip: LAKE CITY FL 32024

Title DIRECTOR  
Name WHITEHURST, KEN  
Address 137 SW HUCKLEBERRY COURT  
City-State-Zip: LAKE CITY FL 32024

*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:** SHIRRELL L. HICKS

**SECRETARY, TREASURER 01/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date