# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Mar 01, 2006 8:00 am**
**Secretary of State**
03-01-2006 90018 045 ****61.25

DOCUMENT # 702445

1. Entity Name

THE DEAUVILLE INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 3215 SE 10TH ST<br>POMPANO BEACH FL 33062 | 3215 SE 10TH ST<br>POMPANO BEACH FL 33062 |

1st MOORE CR2E037 (10/05)

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. FEI Number 59-0951676 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

OPARA, PEGGY D
3215 SE 10TH ST, #202
POMPANO BEACH FL 33062

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS $61.25**
**Due By May 1, 2006**

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 DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SLACK, SAM<br>415 GLEN EAGLES DR<br>SUMMERVILLE SC 29483 | ☒ Delete | D DAVID ANTHONY<br>4371 STONEY RIDGE RD.<br>AVON, OH 44011 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>JENNINGS, RICK<br>20695 MCCORMICK ST<br>DETROIT MI 48224 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>BEGLEY, EDWARD<br>3215 SE 10TH ST #203<br>POMPANO BEACH FL 33062 | ☒ Delete | MARYANN SHERMAN<br>6557 WINDSOR DR.<br>PARKLAND, FL. 33067 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>PERKINS, WAYNE<br>3215 SE 10TH ST #208<br>POMPANO BEACH FL 33062 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>HORN, DIANE M<br>3215 SE 10TH ST<br>POMPANO BEACH FL 33062 | ☒ Delete | SD CAROL RICK<br>30008 CINNAMON WAY<br>N. OLMSTED, OH 44070 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

954-942-7359

**SIGNATURE:** X Carol Rick Sec. 2-17-06