2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728286

FILED Apr 04, 2007 Secretary of State

Entity Name: DEER RUN ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8009 S ORANGE AVE ORLANDO, FL 328096711 US **Current Mailing Address: New Mailing Address:** 8009 S ORANGE AVE ORLANDO, FL 328096711 US FEI Number: 59-1541735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LELAND MANAGEMENT 8009 S. ORANGE AVE. ORLANDO, FL 328096711 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FEDERICO, F J Name: Name: 274 DEER RUN DRIVE SOUTH Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: Title: VPD (X) Change () Addition () Delete MORSE, HELEN Name: ROSS, JAMES P Name: Address: 1923 N MOHAWK Address: 9680 DEER RUN DRIVE #47-D City-St-Zip: CHICAGO, IL 60614 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: () Change (X) Addition TRUSTEES, JACK BLESSING Name: Name: Address: Address: 9782 DEER RUN DRIVE #26-A City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: SD () Change (X) Addition Name: Name: GHEGAN, THERESA 9664 DEER RUN DRIVE #51-B Address: Address: City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: () Change (X) Addition ENSSLEN, RICHARD Name: Name: 9790 DEER RUN DRIVE #24-A Address: Address: City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: () Change (X) Addition FAULDS, THOMAS Name: Name: Address: Address: 239 DEER RUN DRIVE S. #67-B PONTE VEDRA BEACH, FL 32082 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: F.J. FEDERICO PD 04/04/2007