## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#737616** 

Entity Name: DEBARY HALL INC.

FILED May 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

210 SUNRISE BLVD DEBARY, FL 32713 US

Current Mailing Address: New Mailing Address:

PO BOX 911 PO BOX 530911

DEBARY, FL 32713 US DEBARY, FL 32713 US

FEI Number: 59-1745677 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CAREY, JAMES SCOTT, SHERILYN

1582 COVERED BRIDGE DR. 404 HOLLINGSWORTH COURT DELAND, FL 32724 US DEBARY, FL 32713 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: SHERILYN SCOTT 05/15/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 GUNTER, PATRICIA A
 Name:
 URCHUK, JANA

 Address:
 219 CADDIE COURT
 Address:
 105 GLEN CLUB COURT

 City-St-Zip:
 DEBARY, FL 32713
 City-St-Zip:
 DEBARY, FL 32713

Title: S ( ) Delete Title: S (X) Change ( ) Addition

Name: URCHUCK, JANA Name: SCOTT, SHERILYN

Address: 105 GLEN CLUB COURT Address: 404 HOLLINGSWORTH COURT City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

Title: T ( ) Delete Title: T (X) Change ( ) Addition

Name: CAREY, JAMES Name: SHAFFER, JANE

 Address:
 1582 COVERED BRIDGE DR.
 Address:
 102 BRASSINGTON DRIVE

 City-St-Zip:
 DELAND, FL 32724
 City-St-Zip:
 DEBARY, FL 32713

Title: V () Delete Title: V (X) Change () Addition

 Name:
 DYKES, SHARON
 Name:
 FREEMAN, SHARON

 Address:
 218 CADDIE COURT
 Address:
 226 BUNKER COURT

 City-St-Zip:
 DEBARY, FL 32713
 City-St-Zip:
 DEBARY, FL 32713

I hereby certify that the information supplied with this filing does not qualify 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: SHERILYN SCOTT S 05/15/2007