2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756836

FILED Mar 05, 2009 Secretary of State

Entity Name: VILLAS OF DEERWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 15600 SW 288 STREET STE #406 HOMESTEAD, FL 33033 **Current Mailing Address: New Mailing Address:** C/O HARBOR MANAGEMT SVCS C/O HARBOR MANAGEMT SVCS P O BOX 924176 P O BOX 924176 HOMESTEAD, FL 330921176 HOMESTEAD, FL 33092 US FEI Number: 59-2144674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOODMAN GUENTHER, JOYCE GOODMAN GUENTHER, JOYCE 10723 SW 104 STREET 10723 SW 104 ST MIAMI, FL 33176 MIAMI, FL 33176 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: 03/05/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete RODGERS, KATHER MONTERO, ALBERT Name: Name: 12462 SW 147 TERR. Address: 15600 SW 288 STREET, #406 Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: HOMESTEAD, FL 33033 Title: () Delete Title: (X) Change () Addition THOMPSON, ROBERT THOMPSON, ROBERT Name: Name: Address: 14551 SW 124 PLACE Address: 15600 SW 288 STREET, #406 City-St-Zip: MIAMI, FL 33186 City-St-Zip: HOMESTEAD, FL 33033 Title: () Delete Title: (X) Change () Addition LATHAM, GLORIA Name: LATHAM, GLORIA Name: 12678 SW 146 ST 15600 SW 288 STREET, #406 Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: HOMESTEAD, FL 33033 Title: () Delete Title: () Change (X) Addition WILLOUGHBY, STEVE Name: Name: 15600 SW 288 STREET, #406 Address: Address: City-St-Zip: City-St-Zip: HOMESTEAD, FL 33033 Title: () Delete Title: () Change (X) Addition BOADA, GABRIEL Name: Name: 15600 SW 288 STREET, #406 Address: Address: HOMESTEAD, FL 33033 City-St-Zip: City-St-Zip:

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: ROBERT THOMPSON P 03/05/2009