

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **763444** (7)
1. Corporation Name
DEER RUN HOMEOWNERS ASSOCIATION #21-A, INC.

Principal Place of Business 311 GOOSECREEK DRIVE P O BOX 3654 WINTER SPRINGS FL 32708	Mailing Address 311 GOOSECREEK DRIVE P O BOX 3654 WINTER SPRINGS FL 32708
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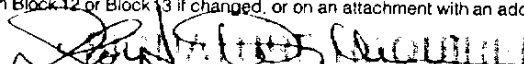


2. Principal Place of Business 21 360 Ringwood Circle Suite, Apt. #, etc. 22 P.O. Box 3654 City & State 23 Winter Springs Zip 24 32708		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 05/25/1982	3a. Date of Last Report 06/12/1995
				4. FEI Number 59-2434106	Applied For Not Applicable
				5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent EBNER, GARY M 311 GOOSECREEK DR WINTER SPRINGS FL 32708		10. Name and Address of New Registered Agent 81 Name John Llanio 82 Street Address (P.O. Box Number is Not Acceptable) 360 Ringwood Circle 83 84 City Winter Springs FL 85 Zip Code 32708	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE John Llanio John LLANIO 7-18-96 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHEID, ROBERT ☒ DELETE 334 GOOSECREEK DR WINTER SPRINGS FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President ☐ Change ☒ Addition John Llanio 360 Ringwood Circle Winter Springs, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EBNER, GARY ☒ DELETE 311 GOOSECREEK DR WINTER SPRINGS FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Vice President ☐ Change ☒ Addition Ralph Di Bari 327 Goosecreek Drive Winter Springs, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEWART, SCOTT ☒ DELETE 310 GOOSECREEK DR WINTER SPRINGS FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Secretary ☐ Change ☒ Addition Julie Schmitzer 341 Ringwood Circle Winter Springs, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, LLOYD ☐ DELETE 326 GOOSECREEK DR WINTER SPRINGS FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Transfer Director ☐ Change ☒ Addition Wayne Moore 325 Ringwood Circle Winter Springs, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO BUELICH, KIM ☒ DELETE 300 RINGWOOD CIR. WINTER SPRINGS FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Director ☐ Change ☒ Addition Margie McClellan 319 Goosecreek Drive Winter Springs, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 900001901239 -07/23/96--01026--032 ***61.25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **7/2/96** **407-662-5251**
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (3/96)