

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 17, 2004 08:00 AM
Secretary of State

DOCUMENT # 763444 1. Entity Name DEER RUN HOMEOWNERS ASSOCIATION #21-A, INC.					
Principal Place of Business 165 W. SR 434 WINTER SPRINGS FL 32708				Mailing Address P.O. BOX 915322 LONGWOOD FL 32791	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2434106	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NATIONAL ASSOCIATION MANAGEMENT CO. 165 WEST STATE ROAD 434 WINTER SPRINGS FL 32708				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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		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					
TITLE	PD ZIMMERMAN, JEFF 348 RINGWOOD CIRCLE WINTER SPRINGS FL 32708	☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	VD MEIER, KURT 309 RINGWOOD CIRCLE WINTER SPRINGS FL 32708	☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	STD MOORE, WAYNE 325 RINGWOOD CIRCLE WINTER SPRINGS FL 32708	☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	D SCHNITKER, STEVE 341 RINGWOOD CIRCLE WINTER SPRINGS FL 32708	☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
U00000054740 02/17/04-80008-019 61.25					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
SIGNATURE: <i>[Signature]</i> JW ZIMMERMAN 1/29/04 407 444-8327					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					