2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# 771045

Entity Name: DEER CREEK VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

566 EMERALD WAY, EAST
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

1215 E HILLSBORO BLVD
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 59-2341079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LARRY E. SCHNER, P.A.
750 S. DIXIE HWY.
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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:

Title:	D	( ) Delete
Name:	FORRISTALL, BILL	
Address:	2549 EMBER WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL	
Title:	P	( ) Delete
Name:	EDWARDS, JAMES	
Address:	2538 EMERALD WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL	
Title:	TD	( ) Delete
Name:	BOYD, BOB	
Address:	2691 EMERALD WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL 33442	
Title:	V	( ) Delete
Name:	KENDZIA, JOAN	
Address:	2648 EMERALD WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL 33442	
Title:	D	( ) Delete
Name:	BAIRD, LISA	
Address:	2608 EMERALD WAY	
City-St-Zip:	DEERFIELD BEACH, FL 33442	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	EDWARDS, JAMES	
Address:	2538 EMERALD WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	KENDZIA, JOAN	
Address:	2648 EMERALD WAY NORTH	
City-St-Zip:	DEERFIELD BEACH, FL 33442	
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: JOAN KENDZIA P 03/17/2009

Electronic Signature of Signing Officer or Director — Date