

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

02-05-2007 90083 004 ****61.25

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1. Entity Name
DEER LAKES OWNERS' ASSOCIATION, INC.

Principal Place of Business
**P.O. BOX 411028
MELBOURNE, FL 32941**

Mailing Address
**100 PARNELL STREET
MERRITT ISLAND, FL 32953**

66004840



2. Principal Place of Business - No P.O. Box #
3371 Deer Lakes Dr
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 411028
Suite, Apt. #, etc.

03092007 Chg-NP CR2E037 (12/06)

City & State
Melbourne FL
Zip
32940

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Melbourne, FL
Zip
32940

4. FEI Number
59-3755486
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RIVERS, RICHARD
3284 CLOUDBERRY PL
MELBOURNE, FL 32941**

7. Name and Address of New Registered Agent
Name **Pamela Fazzino**
Street Address (P.O. Box Number is Not Acceptable)
3371 Deer Lakes Dr
City **Melbourne** FL Zip Code **32940**

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 *Pamela Fazzino* **3/8/07**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)
Pamela Fazzino, President DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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	D	☒ Delete
NAME	PUEGO, MARIA	
STREET ADDRESS	P.O. BOX 411028	
CITY-ST-ZIP	MELBOURNE, FL 32941	
TITLE	D	☐ Delete
NAME	FAZZINO, PAMELA	
STREET ADDRESS	P.O. BOX 411028	
CITY-ST-ZIP	MELBOURNE, FL 32941	
TITLE	D	☒ Delete
NAME	RIVERS, RICHARD	
STREET ADDRESS	P.O. BOX 411028	
CITY-ST-ZIP	MELBOURNE, FL 32941	
TITLE		☐ 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	D	☐ Change ☒ Addition
NAME	Frank Klecka	
STREET ADDRESS	P.O. Box 411028	
CITY-ST-ZIP	Melbourne, FL 32941	
TITLE	D	☐ Change ☒ Addition
NAME	Glen Johnson	
STREET ADDRESS	P.O. Box 411028	
CITY-ST-ZIP	Melbourne, FL 32941	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Pamela Fazzino* **3/8/07** **321-255-3705**
Signature and typed or printed name of signing officer or director Date Daytime Phone #
Pamela Fazzino