

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007269

FILED
Mar 11, 2009
Secretary of State

Entity Name: DEER LAKES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1331 BEDFORD DR
13
MELBOURNE, FL 32940

New Principal Place of Business:

1331 BEDFORD DR
103
MELBOURNE, FL 32940

Current Mailing Address:

P.O. BOX 411028
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-3755486 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, JAMES
1331 BEDFORD DR 103
MELBOURNE, FL 32940 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: PD () Delete
Name: KLECHA, FRANK
Address: P.O. BOX 411028
City-St-Zip: MELBOURNE, FL 32941

Title: D () Delete
Name: FAZZINO, PAMELA
Address: P.O. BOX 411028
City-St-Zip: MELBOURNE, FL 32941

Title: VTD () Delete
Name: JOHNSON, GLENN
Address: P.O. BOX 411028
City-St-Zip: MELBOURNE, FL 32941

Title: SD () Delete
Name: WAGNER, SUSAN
Address: 3381 DEER LAKES DR
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: FORSBERY, SALLY
Address: 4883 OUTLOOK DR
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: MCCOY, GRADY
Address: 4862 OUTLOOK DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: JOHNSON, GLENN
Address: P.O. BOX 411028
City-St-Zip: MELBOURNE, FL 32941

Title: D (X) Change () Addition
Name: WAGNER, SUSAN
Address: 3381 DEER LAKES DR
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change () Addition
Name: FORSBURG, SALLY
Address: 4883 OUTLOOK DR
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change () Addition
Name: BROCK, CHIP
Address: PO BOX 410548
City-St-Zip: MELBOURNE, FL 32940

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: JAMES KENNEY

RA

03/11/2009

Electronic Signature of Signing Officer or Director

Date