

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N01800**

(4)

1. Corporation Name

DEERHAVEN ASSOCIATION, INC.



Principal Place of Business

**47400 NORTHWEST AVE
PAISLEY FL 32767
US**

Mailing Address

**29418 CENTRAL BLVD
PAISLEY FL 32767-9750
US**

3. Date Incorporated or Qualified
03/07/1984

3a. Date of Last Report
01/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-7282653

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

10. Name and Address of New Registered Agent

**CLARK WILMA V.
29418 CENTRAL BLVD
PAISLEY FL 32767**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

Wilma V. Clark

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-18-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **LANCASTER, ARNOLD W**
STREET ADDRESS **29504 CENTRAL BLVD.**
CITY-ST-ZIP **PAISLEY FL 32767**

1.1 TITLE **NEFF, KAREL** ☐ Change ☒ Addition
1.2 NAME **29723 SOUTH BLVD**
1.3 STREET ADDRESS **PAISLEY, FL 32767**
1.4 CITY-ST-ZIP **Auxiliary**

TITLE **V** ☐ DELETE
NAME **SWINDLE, ERNEST**
STREET ADDRESS **29710 EAST COURT**
CITY-ST-ZIP **PAISLEY FL 32767**

2.1 TITLE **MILLER, TOMMY** ☐ Change ☐ Addition
2.2 NAME **29440 CENTRAL BLVD**
2.3 STREET ADDRESS **PAISLEY, FL 32767**
2.4 CITY-ST-ZIP

TITLE **DST** ☐ DELETE
NAME **CLARK, WILMA V**
STREET ADDRESS **29418 CENTRAL BLVD.**
CITY-ST-ZIP **PAISLEY FL 32767**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **DST** ☐ DELETE
NAME **BLESSING, TERRIE**
STREET ADDRESS **47027 NORTHWEST AVE.**
CITY-ST-ZIP **PAISLEY FL 32767**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **DEARMAS, RAYMOND**
STREET ADDRESS **47407 NORTHWEST AVE.**
CITY-ST-ZIP **PAISLEY FL 32767**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **RIEDY, DAVID**
STREET ADDRESS **29525 CENTRAL CT.**
CITY-ST-ZIP **PAISLEY FL 32767**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Wilma V. Clark

WILMA V. CLARK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-96 352-669-4349

Date

Daytime Phone #

CR2E037 (12/95)