

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000110

FILED
Apr 28, 2008
Secretary of State

Entity Name: DEERWOOD COMMONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13913 SW 119 AVENUE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

10165 NW 19 STREET
MIAMI, FL 33172 US

New Mailing Address:

13913 SW 119 AVENUE
MIAMI, FL 33186 US

FEI Number: 54-2164910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANN, MICHAEL J
13913 SW 119 AVENUE
MIAMI, FL 33186 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: P () Delete
Name: MANN, MICHAEL J
Address: 13913 SW 119 AVENUE
City-St-Zip: MIAMI, FL 33186 US

Title: T () Delete
Name: NAVARRO, JOSH
Address: 13961 SW 119TH AVENUE
City-St-Zip: MIAMI, FL 33186 US

Title: S () Delete
Name: ESTOPINAN, PAUL
Address: 13943 SW 199TH AVENUE
City-St-Zip: MIAMI, FL 33186 US

Title: VP () Delete
Name: SACO, MICHAEL
Address: 13955 SW 119TH AVENUE
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: LISA, GREHN
Address: 14836 SW 132 AVENUE
City-St-Zip: MIAMI, FL 33186 US

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: MICHAEL J MANN

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date