

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 06, 2008
Secretary of State

DOCUMENT# N05000004796

Entity Name: THE VILLAS AT DEER RUN TOWNHOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**232 WILSHIRE BLVD
CASSELBERRY, FL 32707**New Principal Place of Business:****Current Mailing Address:**232 WILSHIRE BLVD
CASSELBERRY, FL 32707**New Mailing Address:****FEI Number:** 59-3823014**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BARBER, FRANK P
232 WILSHIRE BLVD
CASSELBERRY, FL 32707 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: BARRENACHE, GABRIEL
Address: 1949 VARICK WAY
City-St-Zip: CASSELBERRY, FL 32707

Title: VP () Delete
Name: GRIDE, SANDRA R
Address: 1546 BARKING DEER LANE
City-St-Zip: CASSELBERRY, FL 32707

Title: S/T (X) Delete
Name: BLINDERMAN, PAIGE C
Address: 1474 BARKING DEER COVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIDER, SANDRA R
Address: 1546 BARKING DEER COVE
City-St-Zip: CASSELBERRY, FL 32707

Title: S/T (X) Change () Addition
Name: MURPHY, JOAN
Address: 1480 BARKING DEER LANE
City-St-Zip: CASSELBERRY, FL 32707

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: FRANK PAUL BARBER

R/A

11/06/2008

Electronic Signature of Signing Officer or Director

Date