

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 07, 2007**  
**Secretary of State**

DOCUMENT# N05000008867

**Entity Name:** DEER HAVEN PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**20200 GRAHAM LN  
LUTZ, FL 33558**New Principal Place of Business:****Current Mailing Address:**20200 GRAHAM LN  
LUTZ, FL 33558**New Mailing Address:****FEI Number:** 14-1958919**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CRAVENS, MARK  
20200 GRAHAM LN  
LUTZ, FL 33558 US**Name and Address of New Registered Agent:**MEHNER, JOHN  
5611 TERN COURT  
TAMPA, FL 33625 US

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: JOHN MEHNER

09/07/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CRAVENS, MARK E  
Address: 20200 GRAHAM LN  
City-St-Zip: LUTZ, FL 33558

Title: D ( ) Delete  
Name: CRAVENS, JILL M  
Address: 20200 GRAHAM LN  
City-St-Zip: LUTZ, FL 33558

Title: D ( ) Delete  
Name: CUNNINGHAM, DANIEL L  
Address: 2984 LAKE SAXON DR  
City-St-Zip: LAND O' LAKES, FL 34639

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MEHNER, JOHN  
Address: 5611 TERN COURT  
City-St-Zip: TAMPA, FL 33625

Title: D (X) Change ( ) Addition  
Name: MOORE, JAY  
Address: 4514 HUDSON LANE  
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change ( ) Addition  
Name: PARZIALE, JAMES  
Address: 8224 SETTLERS POINTE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Change (X) Addition  
Name: COPLEN, CARRIE  
Address: 3808 CARROLLWOOD PLACE CIR. APT. 107  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Change (X) Addition  
Name: COPLEN, JOHN  
Address: 3808 CARROLLWOOD PLACE CIR. APT. 107  
City-St-Zip: TAMPA, FL 33624

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: JOHN MEHNER

D

09/07/2007

Electronic Signature of Signing Officer or Director

Date