

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004501

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** THE RESERVE AT DEER RUN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

96063 ESTATE DR.  
YULEE, FL 32097

**New Principal Place of Business:**

**Current Mailing Address:**

96063 ESTATE DR.  
YULEE, FL 32097

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JOHNSON, STACY  
96063 ESTATE DR.  
YULEE, FL 32097 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: DST ( ) Delete  
Name: JOHNSON, STACY T.  
Address: 96063 ESTATE DR.  
City-St-Zip: YULEE, FL 32097

Title: DV ( ) Delete  
Name: JOHNSON, ROBERT  
Address: 96082 ESTATE DR.  
City-St-Zip: YULEE, FL 32097

Title: DP ( ) Delete  
Name: JOHNSON, JEAN  
Address: 96082 ESTATE DR.  
City-St-Zip: YULEE, FL 32097

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

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

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

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: STACY T JOHNSON

DST

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date