

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07135

FILED
Apr 20, 2004
Secretary of State**Entity Name:** DEERWOOD II CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1166 PELICAN BAY DR.
DAYTONA BEACH, FL 32119 US**New Principal Place of Business:****Current Mailing Address:**1166 PELICAN BAY DR.
DAYTONA BEACH, FL 32119 US**New Mailing Address:****FEI Number:** 59-2688836**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BARKIN, MICHELE
1166 PELICAN BAY DR.
DAYTONA BEACH, FL 32119 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: GONZALES, BEATRIZ
Address: 187 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V () Delete
Name: SCHILDER, JESSICA
Address: 141 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T () Delete
Name: WEINHOFER, MARY J
Address: 141 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S () Delete
Name: LAFONTAINE, ALMA
Address: 100 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: QUATROCCI, BONNIE
Address: 103 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SCHILDER, ROBERT
Address: 141 WHITE FAWN DR.
City-St-Zip: DAYTONA BEACH, FL 32114

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

Title: S (X) Change () Addition
Name: CONSIDINE, MARTIN
Address: 113 WHITE FAWN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: SHERMAN, ALAN
Address: 192 WHITE FAWN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BEATRIZ GONAZLEZ

P

04/20/2004

Electronic Signature of Signing Officer or Director

Date