## 2008 NOT-FOR-PROFIT © DRPORATION ANNUAL REPORT

## Feb 29, 2008 08:00 A Secretary of State DOCUMENT # N12529 1. Entity Name DEER RUN OWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address 5000 NW 62ND COURT 5000 NW 62ND COURT GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 US CR2E037 (4/06) 02282008 No Chg-NP DO NOT WRITE IN THIS SPACE Applied For 59-2639590 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DOORBAR, PATRICIA G DO NOT WRITE 5000 NW 62ND COURT GAINESVILLE, FL 32653 IN THIS SPACE 8. 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. I am familiar with, and accept Signature, typed or printed name of registered agent and tale if applicable. DATE (NOTE: Registered Agent signature required when reinstating) U00000843813 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be # Trust Fund Contribution. 03/12/08-80010-016 61.25 Due by May 1, 2008 OFFICERS AND DIRECTORS 10. TITLE TD DOORBAR, PATRICIA G STHEET ADDRESS 5000 NW 62ND COURT CITY-ST-ZIP GAINESVILLE, FL 32653 TITLE NAME STEVENER, JOANN STREET ADDRESS **5201 NW 62ND COURT** CITY-ST-ZIP GAINESVILLE, FL 32653 TITLE KIMBERLY, SALLY STREET ADDRESS 5002 NW 64TH LANE DO NOT WRITE CITY-ST-ZIP GAINESVILLE, FL 32653 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DILE NAME

12. Thereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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 of flustee expowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attacting of with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NOTHER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2867

352-335-9455

**FILED** 

Daytime Phy