


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 26, 2007 8:00 am**  
**Secretary of State**

03-26-2007 90063 008 \*\*\*\*61.25

<b>DOCUMENT # N15644</b>	
1. Entity Name <b>DEEP CREEK GARDENS CONDOMINIUM ASSOCIATION, INC.</b>	

Principal Place of Business <b>25100 SANDHILL BLVD X-104 PORT CHARLOTTE, FL 33983 US</b>	Mailing Address <b>25100 SANDHILL BLVD X104 PUNTA GORDA, FL 33983 US</b>
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

0112007 Chg-NP CR2E037 (12/06)	
4. FEI Number <b>59-2709278</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent	
<b>STAIANO, FRED 25100 SANDHILL BLVD D 103 PUNTA GORDA, FL 33983</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
<b>FL</b>	

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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make check payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	<b>DORIO, FLO</b>
STREET ADDRESS	<b>25100 SANDHILL BLVD # Q204</b>
CITY-ST-ZIP	<b>PORT CHARLOTTE, FL 33983</b>
TITLE	D <input type="checkbox"/> Delete
NAME	<b>STAIANO, FRED</b>
STREET ADDRESS	<b>25100 SANDHILL BLVD D103</b>
CITY-ST-ZIP	<b>PORT CHARLOTTE, FL</b>
TITLE	P <input type="checkbox"/> Delete
NAME	<b>NATOLI, PHILLIP</b>
STREET ADDRESS	<b>25100 SANDHILL BOULEVARD SUITE C202</b>
CITY-ST-ZIP	<b>PUNTA GORDA, FL 33983</b>
TITLE	VP <input checked="" type="checkbox"/> Delete
NAME	<b>RAO, MICHAEL</b>
STREET ADDRESS	<b>25100 SANDHILL BOULEVARD SUITE S201</b>
CITY-ST-ZIP	<b>PUNTA GORDA, FL 33983</b>
TITLE	D <input type="checkbox"/> Delete
NAME	<b>LEVATINO, FRANCES</b>
STREET ADDRESS	<b>25100 SANDHILL BOULEVARD SUITE D102</b>
CITY-ST-ZIP	<b>PORT CHARLOTTE, FL 33983</b>
TITLE	D <input type="checkbox"/> Delete
NAME	<b>LUCIANO, MADELINE</b>
STREET ADDRESS	<b>25100 SANDHILL BOULEVARD SUITE P204</b>
CITY-ST-ZIP	<b>PORT CHARLOTTE, FL 33983</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Marine, Joseph</b>
STREET ADDRESS	<b>25100 Sandhill Blvd.# E103</b>
CITY-ST-ZIP	<b>Punta Gorda, FL 33983</b>
TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Nina Puopolo</b>
STREET ADDRESS	<b>25100 Sandhill Blvd # R202</b>
CITY-ST-ZIP	<b>Punta Gorda, FL 33983</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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 or trustee empowered 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 attachment with an address, with all other like empowered.

**SIGNATURE:** *Fred Staiano, Treasurer* 11/18/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #