


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90207 030 \*\*\*\*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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40037344



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01242008 Chg-NP CR2E037 (12/06)

4. FEI Number <b>59-2709278</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
STAIANO, FRED 25100 SANDHILL BLVD D 103 PUNTA GORDA, FL 33983		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make check payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORIO, FLO <input checked="" type="checkbox"/> Delete 25100 SANDHILL BLVD # Q204 PORT CHARLOTTE, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAIANO, FRED <input type="checkbox"/> Delete 25100 SANDHILL BLVD D103 PORT CHARLOTTE, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NATOLI, PHILLIP <input type="checkbox"/> Delete 25100 SANDHILL BOULEVARD SUITE C202 PUNTA GORDA, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARINE, JOSEPH <input type="checkbox"/> Delete 25100 SANDHILL BLVD. #E103 PUNTA GORDA, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVATINO, FRANCES <input type="checkbox"/> Delete 25100 SANDHILL BOULEVARD SUITE D102 PORT CHARLOTTE, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIANO, MADELINE <input type="checkbox"/> Delete 25100 SANDHILL BOULEVARD SUITE P204 PORT CHARLOTTE, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 7/18/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #