FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

DEERWOOD V CONDOMINIUM ASSOCIATION, INC.

	FILEI)
Apr 13	1998	8:00am
Secre	tary o	f State

DECIMOOD 1 COMBONING						
Principal Place of Business	incipal Place of Business Mailing Address				'	
3511 S PENINSULA DR DAYTONA BCH FL 32127 US		3511 S PENINSULA DR DAYTONA BCH FL 32127			3. Date Incorporated or Qualified 07/25/1986	
00	00				4. FEI Number Applied For	
					59-2688845 Not Applica	ble
Principal Place of Business 1	2a. Mailing Addr	888			5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State	City & State				7. Is this nonprofit corporation a homeowners association? Yes \(\subseteq \text{No} \)	
Zip Country 24 25	Zip 29	Zip Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	
			81	Name		
SOLOMON, STANLEY SOUTHEAST MANAGEMENT SERVICES, INC 3511 SOUTH PENINSULA DRIVE DAYTONA BEACH FL 32127		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
			83			
		84	City	FL 85 Zip Code		
 Pursuant to the provisions of Sections 617.05 office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obli 	le of Florida. Such char	nae was authorize	d bv	the corporati	poration submits this statement for the purpose of changing its register tion's board of directors. I hereby accept the appointment as registere	ed d

SIGNATURE _				DA	
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re		required when reinstating) DATE	OC IN 10
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
TITLE		DELETE	1.1 TITLE	☐ Change	Addition
NAME	RUHLEN, MARGARET		1.2 NAME		
STREET ADDRESS	105 WHITE FAWN DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32114		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE	☐ Change	Addition
NAME	HOUSEKNECHT, DAWN		2.2 NAME		
STREET ADDRESS	115 WHITE FAWN DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL		2.4 CITY-ST-ZIP		12.000
TITLE		DELETE	3.1 TITLE	Change	☐ Addition
NAME	SANZENBACHER, RICHARD		3.2 NAME		
STREET ADDRESS	103 WHITE FAWN DR		3.3 STREET ADDRESS		
CITY-\$1-21P	DAYTONA BEACH FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	Change	Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	——————————————————————————————————————	DELETE	5.1 TITLE	Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CłTY - ST - ZIP		T sain
TITLE		DELETE	6.1 TITLE	Change	☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			0.4.0(T)/ CT 7(0		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, non an attachment with an address.