
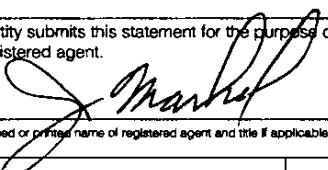
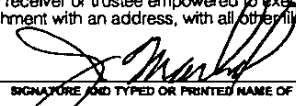


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90185 035 \*\*\*\*61.25

<b>DOCUMENT #N19130</b> 1. Entity Name <b>TOWNHOMES OF DEEP CREEK HOMEOWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>1416 RAZORBILL LN PUNTA GORDA, FL 33983 US</b>		Mailing Address <b>PO BOX 380758 MURDOCK, FL 33938-6758 US</b>	
2. Principal Place of Business <b>PROGRESSIVE COMMUNITY MGMT, Inc</b> Suite, Apt. #, etc. <b>1801 GLENGARY STREET</b> City & State <b>SARASOTA, FL</b> Zip <b>34231</b> Country <b>USA</b>		3. Mailing Address <b>PROGRESSIVE COMMUNITY MGMT, Inc</b> Suite, Apt. #, etc. <b>1801 GLENGARY STREET</b> City & State <b>SARASOTA, FL</b> Zip <b>34231</b> Country <b>USA</b>	
4. FEI Number <b>59-2768301</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		02242006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent <b>MARTIN, KENNETH A 1416 RAZORBILL LN PUNTA GORDA, FL 33983</b>		7. Name and Address of New Registered Agent Name <b>PROGRESSIVE COMMUNITY MANAGEMENT, Inc</b> Street Address (P.O. Box Number is Not Acceptable) <b>1801 GLENGARY STREET</b> City <b>SARASOTA</b> FL Zip Code <b>34231</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  <b>Jim MARKEL</b> 4/24/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>DEMPSEY, JOHN</b> P O BOX 380758 MURDOCK, FL 33938	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>MARKEL, Jim</b> <b>1801 GLENGARY STREET</b> <b>SARASOTA, FL 34231</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>BOSTOCK, RAY</b> P O BOX 380758 PUNTA GORDA, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT</b> <b>SUTTON, WILLIAM</b> <b>1801 GLENGARY STREET</b> <b>SARASOTA, FL 34231</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>ALLDER, LARRY</b> P O BOX 380758 PUNTA GORDA, FL 33983	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <b>CROMIKA, JOHN</b> P O BOX 380758 MURDOCK, FL 33938	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>CHADBOURNE, KEN</b> P O BOX 380758 MURDOCK, FL 33938	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: 		<b>Jim MARKEL</b> 4/24/06 941-921-5393 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small>	