

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2008 8:00 am
Secretary of State

08-04-2008 90032 033 ****68.00

DOCUMENT # N20916

1. Entity Name
**DEER CREEK GOLF AND TENNIS RV RESORT
PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business
**42769 HWY 27
LOT 182
DAVENPORT, FL 33837**

Mailing Address
**42769 HWY 27
LOT 182
DAVENPORT, FL 33837**

60046168



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

42769 Hwy 27

Suite, Apt. #, etc.

Suite, Apt. #, etc.

LOT 181

07212008

Chg-NP

CR2E037 (12/06)

City & State

City & State
DAVENPORT FL

4. FEI Number
86-0543812

Applied For

Not Applicable

Zip

Country

Zip
33837

Country

POLK

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KLENOW, JOYCE
42769 HWY 27 LOT 158
DAVENPORT, FL 33837**

7. Name and Address of New Registered Agent

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

7/24/08

Filing Fee is \$61.25

Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PS** ☐ Delete
NAME **RUECKL, RON J**
STREET ADDRESS **42769 HWY 27 LOT 85**
CITY-ST-ZIP **DAVENPORT, FL 33837**

TITLE **VP** ☐ Delete
NAME **JOYNSON, CLIFF**
STREET ADDRESS **42769 HWY 27 LOT 72**
CITY-ST-ZIP **DAVENPORT, FL 33837**

TITLE **D** ☒ Delete
NAME **CRAWFORD, JUANITA**
STREET ADDRESS **42769 HWY 27 LOT 25**
CITY-ST-ZIP **DAVENPORT, FL 33837**

TITLE **D** ☒ Delete
NAME **GRISWALD, JIM**
STREET ADDRESS **42769 HWY 27 LOT 99**
CITY-ST-ZIP **DAVENPORT, FL 33837**

TITLE **T** ☐ Delete
NAME **KLENOW, JOYCE**
STREET ADDRESS **42769 HWY 27 LOT 158**
CITY-ST-ZIP **DAVENPORT, FL 33837**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **ROY HUTTON**
STREET ADDRESS **42769 HWY 27 Lot 117**
CITY-ST-ZIP **DAVENPORT FL 33837**

TITLE ☒ Change ☐ Addition
NAME **EVERETT BURNAM**
STREET ADDRESS **42769 HWY 27 Lot 81**
CITY-ST-ZIP **DAVENPORT FL 33837**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

262-244-5126 7/25/08

Date

Daytime Phone #