

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23051

FILED  
Apr 08, 2011  
Secretary of State

**Entity Name:** DEER LAKE RUN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4700 MILLENIA BLVD., STE 515  
ORLANDO, FL 32839 US

**New Principal Place of Business:**

4700 MILLENIA BLVD.  
STE. 515  
ORLANDO, FL 32839 US

**Current Mailing Address:**

4700 MILLENIA BLVD., STE 515  
ORLANDO, FL 32839 US

**New Mailing Address:**

4700 MILLENIA BLVD.  
STE. 515  
ORLANDO, FL 32839 US

**FEI Number:** 65-0028619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COMMUNITY MANAGEMENT PROFESSIONALS, INC.  
4700 MILLENIA BLVD  
SUITE 515  
ORLANDO, FL 32839 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DOMINIAK, BLAIR  
**Address:** 1185 DEER LAKE CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

**Title:** VP  
**Name:** ENDRIZZI, EMMA  
**Address:** 1330 DEER LAKE CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

**Title:** T  
**Name:** FUENTES, PAM  
**Address:** 1401 DEER LAKE CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

**Title:** S  
**Name:** PYLE, TERRY  
**Address:** 1184 DEER LAKE CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

**Title:** D  
**Name:** SAMPEY, DERRY  
**Address:** 1208 DEER LAKE CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

**Title:** D  
**Name:** ADAMS, SUE  
**Address:** 1101 DEER GULLEY COURT  
**City-St-Zip:** APOPKA, FL 32712

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** BLAIR DOMINIAK

P

04/08/2011

Electronic Signature of Signing Officer or Director

Date