2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27870

FILED Feb 20, 2008 Secretary of State

Entity Name: DEER CREEK PHASE II U.D.I P.O.A. CLASS I, INC.

Current Principal Place of Business: New Principal Place of Business: 42759 HWY 27 DAVENPORT, FL 33837 **Current Mailing Address: New Mailing Address:** 42759 HWY 27 DAVENPORT, FL 33837 FEI Number: 59-3481589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOVING, ERNIE STROUD, DONALD R TR 1200 US HWY 27 #163 42759 HW 27 DAVENPORT, FL 33837 DAVENPORT, FL 33837 US US 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: DONALD R STROUD 02/20/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GOTTSCHALK, ROBERT B Name: Name: 14 PINETREE DR. Address: Address: City-St-Zip: SHIRLEY, NY 119674342 City-St-Zip: Title: () Delete Title: (X) Change () Addition HEDRICKS, GEORGE Name: SAUER, ORVILLE Name: Address: 41 S 11TH ST Address: 9305 ALTHEA City-St-Zip: SUNBURY, PA 17801 City-St-Zip: ST. LOUIS, MO 63123 Title: () Delete Title: () Change () Addition STROUD, DONALD R Name: Name: 803 VILLAGE LANE Address: Address: City-St-Zip: ROSWELL, GA 30075 City-St-Zip: Title: () Delete Title: () Change () Addition MARTIN, CHRIS Name: Name: Address: 16 AIMEE ST Address: City-St-Zip: MEADFORD, ONTARIO, CA NYL185 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition LOVING, ERNIE WEST, TOM Name: Name: 1200 U.S. HWY 27 #163 Address: Address: 219 W. SHASTA LANE DAVENPORT, FL 33837 City-St-Zip: City-St-Zip: VALPARAISO, IN 48385 Title: () Delete Title: () Change () Addition GIBBS, DON Name: Name: Address: 8379 WINSTON WAY Address: JONESBORO, GA 30236 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DONALD R STROUD TR 02/20/2008