

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29568

FILED
Apr 16, 2009
Secretary of State

Entity Name: DEER CREEK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O ADVANCED MGMT INC OF SW FLORIDA
9031 TOWN CENTER PARKWAY
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

C/O ADVANCED MGMT INC OF SW FLORIDA
9031 TOWN CENTER PARKWAY
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 65-0104143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANCED MANAGEMENT OF SW FLORIDA INC
9031 TOWN CENTER PKWY
SUITE #107
BRADENTON, FL 34203 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: PD () Delete
Name: SULLIVAN, JACK
Address: 4565 DEER CREEK BLVD
City-St-Zip: SARASOTA, FL 34238

Title: SD () Delete
Name: SLACK, LINDA
Address: 4700 WHITE TAIL LANE
City-St-Zip: SARASOTA, FL 34258

Title: TD () Delete
Name: FREY, THOMAS
Address: 4739 WHITE TAIL LANE
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: MENTZ, PHIL
Address: 8683 WOODBRIAR DR.
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: MAHON, AL
Address: 8607 WOODBRIAR DR.
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: TABOR, RICHARD
Address: 8263 CYPRESS HOLLOW DR.
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENTZ, PHIL
Address: 8683 WOODBRIAR DR
City-St-Zip: SARASOTA, FL 34238

Title: SD (X) Change () Addition
Name: GARCIA, ROGER
Address: 4540 DEER TRAIL BLVD.
City-St-Zip: SARASOTA, FL 34258

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SULLIVAN, JACK
Address: 4565 DEER CREEK BLVD.
City-St-Zip: SARASOTA, FL 34238

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PHIL MENTZ

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date