2005 NOT-FOR-PROFIT CORPORATION

FILED Apr 04, 2005 8:00 am Secretary of State

04-04-2005 90097 012 ****61.25

ANNUAL REPORT	
DOCUMENT # N30179	
Entity Name DEERWOOD ESTATES HOMEOWNERS ASSOCIATION.	

INC. Principal Place of Susiness Mailing Address LAND CUP PROPERTY SERVICES 13800 SW 144 AVE RD MIAMI, FL 33186 13800 SW 144 AVE RD 50033789 MIAMI, FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEL Numbe Applied For 65-0111614 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -- -- 6.-Name and Address of Current Registered Agent---- 7. Name and Address of New Registered Agent Name SUITS, STEPHEN Street Address (P.O. Box Number is Not Acceptable) 13800 SW 144 AVE RD MIAMI, FL 33186 City Zip Code FL 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 Filing Fee is \$61.25 Make check payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change TITLE Delete TITLE ☐ Addition Hall, Vincent AGUILAR, OLGA NAME NAME 13076 SW 150 TERY 15099 SW 129 PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33186 miami F Delete TITLE Change Change TITLE ROMAN, SANDRA Difranco, Paula 15151 S.W. 128 A NAME STREET ADDRESS 15121 SW 128 AVE. STREET ADDRESS 15151 SW CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-ZIP VΡ Delete Change MCMANUS, ANDREW NAME NAME. STREET ADDRESS 13073 SW 150 TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-ZIP ☐ Delete TITLE ☐ Change TITLE TD

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 all other like empowered.

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

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SIGNATURE:

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TITLE

NAME

TITLE NAME HALL, VINCENT

MIAMI, FL 33186

D'ERANGO, PAULA

15151 SW 128 AVE.

MIAMI, FL 33186

13076 SW 150 TERR

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