

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30179

FILED  
Mar 05, 2009  
Secretary of State

**Entity Name:** DEERWOOD ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13388 SW 128 ST  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LAKEVIEW MGMT, INC  
13388 SW 128 ST  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 65-0111614

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUNETTA, SUE  
13388 SW 128 ST  
MIAMI, FL 33186 US

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

MITZENMACHER, MARGIE  
13388 SW 128 ST  
MIAMI, FL 33186 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: MARGIE MITZENMACHER

03/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SOTOLONGO, ELADIO III  
Address: 12915 SW 150 TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: VD ( ) Delete  
Name: AYALA, FELICIDAD  
Address: 13036 SW 151 LANE  
City-St-Zip: MIAMI, FL 33186

Title: TD ( ) Delete  
Name: MEDINA, GLORIA  
Address: 12983 SW 150 TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: SD ( ) Delete  
Name: BERTELETTI, ANITA  
Address: 12965 SW 150 TERR  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: GOMEZ-BARCO, LUZ  
Address: 12923 SW 150 TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: HALL, VINCENT  
Address: 13076 SE 150 TERRACE  
City-St-Zip: MIAMI, FL 33186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: GLORIA MEDINA

DT

03/05/2009

Electronic Signature of Signing Officer or Director

Date