2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2012
Secretary of State

DOCUMENT# N33209

Entity Name: DEERCREEK COUNTRY CLUB OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10036 SAWGRASS DR WEST
SUITE 1
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

5455 AIA S
SUITE 3
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

5455 AIA SOUTH
SUITE 3
ST. AUGUSTINE, FL 32080 US

FEI Number: 59-2969033 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC.
5455 A1A SOUTH
SUITE 3
ST. AUGUSTINE, FL 32080 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: PARTIN, GEORGE C III
Address: 5455 AIA SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: VP
Name: KLIPPEL, DOUGLAS
Address: 5455 AIA SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: T
Name: BECTON, DANIEL A
Address: 5455 AIA SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: S
Name: GENTRY, PETER
Address: 5455 AIA SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: D
Name: KAGILIERY, JAMES Z
Address: 5455 AIA SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: D
Name: WEST, AARON
Address: 5455 AIA S
City-St-Zip: ST. AUGUSTINE, FL 32080 US

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: JAMES KAGILIERY D 02/06/2012

Electronic Signature of Signing Officer or Director — Date