2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N35597

Entity Name: DEER BROOKE SOUTH HOMEOWNERS' ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

121 RAINTREE CT
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 95
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-3017352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS INC.
121 RAINTREE CT
AUBURNDALE, FL 33823 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:	TREA	( ) Delete
Name:	FIFER, RICHARD	
Address:	2226 DEERBROOKE DR	
City-St-Zip:	LAKELAND, FL 33811	
Title:	PRES	(X) Delete
Name:	WHITTINGTON, ROBERT	
Address:	5827 TROPHY LOOP	
City-St-Zip:	LAKELAND, FL 33811	
Title:	VP	( ) Delete
Name:	KENNERLY, ALLEN	
Address:	5835 TROPHY LOOP	
City-St-Zip:	LAKELAND, FL 33811	
Title:	SEC	( ) Delete
Name:	WALDROUP, LEONA	
Address:	5858 EIGHT POINT LN	
City-St-Zip:	LAKELAND, FL 33811	
Title:	DIR	(X) Delete
Name:	KRUSE, GREGORY	
Address:	5870EIGHT POINT DR	
City-St-Zip:	LAKELAND, FL	
Title:	DIR	( ) Delete
Name:	MESA, AMANDA	
Address:	5963 VELVET LOOP	
City-St-Zip:	LAKELAND, FL 33811	

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:	SEC	(X) Change ( ) Addition
Name:	TURNER, KIM	
Address:	5816 TROPHY LOOP	
City-St-Zip:	LAKELAND, FL 33811	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PRES	(X) Change ( ) Addition
Name:	MESA, AMANDA	
Address:	5963 VELVET LOOP	
City-St-Zip:	LAKELAND, FL 33811	

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: DAVID L BURMAN RA 01/16/2009

Electronic Signature of Signing Officer or Director — Date