

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38609

FILED
Feb 21, 2009
Secretary of State

Entity Name: DEERING BAY CONDOMINIUM I, INC.

Current Principal Place of Business:

13610 DEERING BAY DR
CORAL GABLES, FL 33158 US

New Principal Place of Business:

Current Mailing Address:

13610 DEERING BAY DR
CORAL GABLES, FL 33158 US

New Mailing Address:

C/O CASTLE GROUP
P.O. BOX 559009
FT. LAUDERDALE, FL 33359 US

FEI Number: 65-0427488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REISMAN, JOSEPH B
ONE SE 3RD AVENUE
#3050
MIAMI, FL 33131 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: SD () Delete
Name: ROSTOV, BARBARA
Address: 13647 DEERING BAY DR # 162
City-St-Zip: CORAL GABLES, FL 33158

Title: TD () Delete
Name: PACIN, MICHAEL
Address: 13645 DEERING BAY DR STE 133
City-St-Zip: CORAL GABLES, FL 33158

Title: VD () Delete
Name: GROSS, HOWARD
Address: 16347 DEERING BAY DR # 141
City-St-Zip: CORAL GABLES, FL 33158

Title: D () Delete
Name: RAPPOPORT, SUE
Address: 13645 DEERING BAY DRIVE # 154
City-St-Zip: CORAL GABLES, FL 33158

Title: PD () Delete
Name: SIEGEL, BARRY
Address: 13643 DEERING BAY DR # 116
City-St-Zip: CORAL GABLES, FL 33158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: ROSTOV, BARBARA
Address: 13647 DEERING BAY DR #116
City-St-Zip: CORAL GABLES, FL 33158

Title: TD (X) Change () Addition
Name: PACIN, MICHAEL
Address: 13645 DEERING BAY DR, #133
City-St-Zip: CORAL GABLES, FL 33158

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: ROBERT A. DONNELLY

MGR

02/21/2009

Electronic Signature of Signing Officer or Director

Date