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Mar 26 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N46765** **(6)**

1. Corporation Name

DEERSONG HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
271 SAN GABRIEL ST WINTER SPRINGS FL 32708 US	271 SAN GABRIEL ST WINTER SPRINGS FL 32708-5800 US

3. Date Incorporated or Qualified: 01/09/1992
3a. Date of Last Report: 04/05/1996

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-3243900 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BUTLER, KIMBERLY
325 SAN GABRIEL ST
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Kimberly Butler, PRESIDENT (KIMBERLY BUTLER) DATE: 2/25/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	VD	☐ Change ☑ Addition
NAME	BUTLER, KIMBERLY		1.2 NAME	KENNETH ANGLE	
STREET ADDRESS	325 SAN GABRIEL ST		1.3 STREET ADDRESS	321 SAN GABRIEL ST	
CITY-ST-ZIP	WINTER SPRINGS FL 32708		1.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	VD	☐ DELETE	2.1 TITLE	S/TD	☒ Change ☐ Addition
NAME	GIESELER, JACQUELIN		2.2 NAME	GAIL GUERRINA	
STREET ADDRESS	278 SAN GABRIEL ST		2.3 STREET ADDRESS	203 SAN GABRIEL ST	
CITY-ST-ZIP	WINTER SPRINGS FL 32708		2.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	SD	☑ DELETE	3.1 TITLE	MD	☐ Change ☑ Addition
NAME	HITES, LINDA		3.2 NAME	KEVIN BROWN	
STREET ADDRESS	302 SAN GABRIEL ST		3.3 STREET ADDRESS	329 SAN GABRIEL ST	
CITY-ST-ZIP	WINTER SPRINGS FL 32708		3.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	TD	☑ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GROSS, TAMMY		4.2 NAME		
STREET ADDRESS	126 DEER SONG DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER SPRINGS FL 32708		4.4 CITY-ST-ZIP		
TITLE	CD	☑ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RENDALL, JEAN		5.2 NAME		
STREET ADDRESS	231 SAN GABRIEL ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER SPRINGS FL 32708		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Kimberly Butler, PRESIDENT (KIMBERLY BUTLER) 2/25/97 407-327-0163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0012941