

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-17-2002 90001 046 ****61.25

DOCUMENT # N46765

1. Entity Name

DEERSONG HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

**135 W. PINEVIEW STREET
 ALTAMONTE SPRINGS FL 32714
 US**

Mailing Address

**135 W. PINEVIEW STREET
 ALTAMONTE SPRINGS FL 32714
 US**

73284



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3243900

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PRESIDENTIAL GROUP SOUTH, INC.
 135 W. PINEVIEW STREET
 ALTAMONTE SPRINGS FL 32714**

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	GROSS, TAMMY	
STREET ADDRESS	126 DEERSONG DR	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	DV	☒ Delete
NAME	HENDERSON, RAMONA	
STREET ADDRESS	123 DEERSONG DR	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	STD	☒ Delete
NAME	BOWES, KATHY	
STREET ADDRESS	117 DEERSONG DR	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	☒ Delete
NAME	BERGERON, RAY	
STREET ADDRESS	201 SAN GABRIEL STREET	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP, DEERSONG S.	☐ Change ☒ Addition
NAME	KEY, THELMA	
STREET ADDRESS	231 SAN GABRIEL STREET	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE	S, D	☐ Change ☒ Addition
NAME	DANIELS, TOMDIA	
STREET ADDRESS	235 SAN GABRIEL STREET	
CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Tammy Gross Bingham **TAMMY GROSS Bingham** 1/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)