FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAR -2 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47374 (6)

1. Corporation Name
DEER PARK OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1503 OAK ST SUITE 201 JACKSONVILLE FL 32204 US	C/O J&M ASSOCIATES, INC. 1503 OAK ST JACKSONVILLE FL 32204 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/14/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3125890 ☐ 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
7. Nonprofit with IRS 501(c)(3) $68.75 Supplemental
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1890 S 14th Street	26 P O Box 1408
Suite, Apt. #, etc. 22 Suite 105	Suite, Apt. #, etc. 27
City & State 23 Fernandina Beach FL	City & State 28 Fernandina Beach FL
Zip 24 32034	Country 25 US
Zip 29 32035-1408	Country 30 US

9. Name and Address of Current Registered Agent

J & M ASSOCIATES, INC.
1503 OAK STREET
SUITE 201
JACKSONVILLE FL 32204

10. Name and Address of New Registered Agent

81 Name: Terrell J. Powell
82 Street Address (P.O. Box Number is Not Acceptable): 1890 S 14th Street
83
84 City: Fernandina Beach FL 85 Zip Code: 32034

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Terrell J. Powell (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 1/30/15

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE		☐ Change ☐ Addition
NAME	MOORE MIKE	1.2 NAME		
STREET ADDRESS	9331 JAYBIRD CIRCLE EAST	1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP		
TITLE	DV	2.1 TITLE	D	☒ Change ☐ Addition
NAME	DIFILIPPO, ANTHONY	2.2 NAME		
STREET ADDRESS	9203 JAYBIRD CIRCLE E	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32257	2.4 CITY-ST-ZIP		
TITLE	DST	3.1 TITLE	D	☒ Change ☐ Addition
NAME	JOHNSON GARY L.	3.2 NAME		
STREET ADDRESS	9223 JAYBIRD CIRCLE WEST	3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	V/D	☒ Change ☐ Addition
NAME	MOORE MONICA G.	4.2 NAME		
STREET ADDRESS	9338 JAYBIRD CIRCLE EAST	4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE	T/S/D	☒ Change ☐ Addition
NAME	REYNOLDS CAROLYN L.	5.2 NAME	MICHAEL LEFRANC	
STREET ADDRESS	4880 TREVI DRIVE	5.3 STREET ADDRESS	9371 JAYBIRD CIRCLE E	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information contained with this filing is voluntarily furnished and 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 added on an attachment with an address.

SIGNATURE: X Mike Moore, President 1-25-95 730-0015
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
Mike Moore, President

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