2006 NOT-FOR-PROFIT CORPORATION

May 12, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # N47374 05-12-2006 90025 036 ****61.25 DEER PARK OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address SIGNATURE REALTY SIGNATURE REALTY 4003 HARTLEY RD. 4003 HARTLEY RD. JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182006 Chg-NP CR2E037 (11/05) 4. FE! Number 59-3125890 City & State City & State Applied For Not Applicable Ζıρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required =6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent" Name CANTRELL, BRIAN 4003 HARTLEY RD. Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE, FL 32257 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or privated name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution Due by May 1, 2006 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE TiTLE ☐ Change Addition Keily, Paul Maybird Circle E. Mickey Ville, Fl. 3215 BACHMANN, ROBERT R MARIE NAME 9777 JAYBIRD CIRCLE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32257 VPD Delete TITLE ☐ Change ☐ Addition Buchinanon, Robert 9219 Tayport Circle E. Jocksomille, Ft. 32 W KELLY, PAUL NAME NAME 9219 JAYBIRD CIRCLE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32257 CITY-ST-ZIP Delete TITLE TITLE ☐ Addition THOMPSON, JOANN HAME NAME Hodges Burbara Circle E. 4831 SUSANNA WOODS CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32257 CITY-ST-ZIP Delete D TITLE TITLE ☐ Change Addition WARE, EARL HAME NAME STREET ADDRESS 9235 JAYBIRD CIRCLE EAST STREET ADDRESS CITY-ST-7/P JACKSONVILLE, FL 32257 CiTY-ST-ZIP TITLE Delete TILLE □ Change Addition NAME THOMPSON, WILLIAM NAME STREET ADDRESS 9253 JAYBIRD CIRCLE EAST STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32257 CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowhered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes II further certify that the information indicated in the same legal effect as if made under oath, that I am an officer or director of the corporation of

SIGNATURE

OFFICER OR DIRECTOR ATURE AND TYPED OR PRINTE

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