

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47374

FILED
Apr 27, 2009
Secretary of State

Entity Name: DEER PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3125890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRIAN
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 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: PD () Delete
Name: KELLY, PAUL
Address: 9219 JAYBIRD CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPD () Delete
Name: WARE, EARL
Address: 9235 JAYBIRD CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD () Delete
Name: BESCRIPT, CAROL
Address: 9265 WESLEY COVE CT.
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD () Delete
Name: LANCASTER, BILL
Address: 9371 JAYBIRD CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: DOSKI, STEPHANIE
Address: 9208 JAYBIRD CIRCLE W
City-St-Zip: JACKSONVILLE, FL 32257

Title: D (X) Change () Addition
Name: WARE, EARL
Address: 9235 JAYBIRD CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32257

Title: PD (X) Change () Addition
Name: BESCRIPT, CAROL
Address: 9265 WESLEY COVE CT.
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD (X) Change () Addition
Name: BACHMANN, BOB
Address: 9277 JAYBIRD CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Change (X) Addition
Name: MANDEVILLE, JAMES
Address: 4897 JAYBIRD CIRCLE N
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Change (X) Addition
Name: SMITH, SHEILA
Address: 4880 TREVI DR.
City-St-Zip: JACKSONVILLE, FL 32257

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: CAROL BESCRIPT

PD

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date