

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$200)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 22 AM 8:18

DOCUMENT # N93000005053 (4)

1. Corporation Name

DEER TRAILS NORTH PHASE TWO PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

290 FIRST STREET, SOUTH
WINTER HAVEN FL 33880

290 FIRST STREET, SOUTH
WINTER HAVEN FL 33880

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/10/1993

3a. Date of Last Report

02/16/1994

4. FEI Number

59-3223046

Applied For

Not Applicable

2. Principal Place of Business

21 10204 Rachel Cherie Drive

2a. Mailing Address

26 10204 Rachel Cherie Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Polk City, FL

City & State

28 Polk City, FL

Zip

24 33868

Country

25 USA

Zip

29 33868

Country

30 USA

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)
Tax Exempt Status

FILING FEE IS
\$61.25

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

JOHNSON, JAMES A
290 FIRST STREET, SOUTH
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name

Ken Baldwin

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

10204 Rachel Cherie Drive

83

Polk City, FL 33868

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 Ken Baldwin, President/Director

(NOTE: Registered Agent signature required when reinstating)

June 7, 1995

DATE

12. OFFICERS AND DIRECTORS

TITLE	PVTD
NAME	JOHNSON, JAMES A
STREET ADDRESS	730 W. LAKE OTIS DR.
CITY - ST - ZIP	WINTER HAVEN FL 33880
TITLE	D
NAME	WRIGHT, CHERI J
STREET ADDRESS	3940 THORNHILL RD.
CITY - ST - ZIP	WINTER HAVEN FL 33880
TITLE	SD
NAME	JOHNSON, WILLENE W
STREET ADDRESS	730 WEST LAKE OTIS DR.
CITY - ST - ZIP	WINTER HAVEN FL 33880
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/D	☒ Change ☒ Addition
12 NAME	Ken Baldwin	
13 STREET ADDRESS	10204 Rachel Cherie Drive	
14 CITY - ST - ZIP	Polk City, FL 33868	
21 TITLE	VP/D	☒ Change ☒ Addition
22 NAME	Thomas Jackson	
23 STREET ADDRESS	305 Columbia Avenue	
24 CITY - ST - ZIP	West Cape May, NJ 08204	
31 TITLE	S/T/D	☒ Change ☒ Addition
32 NAME	Joan Andree	
33 STREET ADDRESS	10164 Rachel Cherie Drive	
34 CITY - ST - ZIP	Polk City, FL 33868	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: Ken Baldwin, President/Director

(Signature and typed or printed name of signing officer or director)

June 7, 1995

(Date) (Daytime Phone #)