FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N96000001847 (0) DOCUMENT

DEERFIELD COMMERCIAL PROPERTY OWNERS ASSOCIATION , INC.

Principal Place of Business

Mailing Address

FILED Mar 27 1998 8:00am Secretary of State



151 SOUTHHALL LANE, STE. 230 MAITLAND FL 32751			151 SOUTHHALL LANE, STE. 230 MAITLAND FL 32751			3. Date Incorporated or Qualified 04/04/1996			
						4. FEI Number	TA	pplied For	
						75-2502012	N	ot Applicable	
2. Principal Pl	ace of Business	2a. Mailing Ad	2e. Mailing Address 26				\$8.75 Additional Fee Required		
Suite, Apt. (#, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be			
22		27	<u> </u>			Trust Fund Contribution	Added 1		
City & State	,	City & Sta	City & State			7. Is this nonprofit corporation a homeowners association? Yes No			
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible			
24	25	29	30			Totalian reporty tax cost some cost		No	
	9. Name and Address of C	urrent Registered Ager	nt			10. Name and Address of New Registered Ag	jent		
i				81	Name				
MATTHAI, KAROLINE					82 Street Address (P.O. Box Number is Not Acceptable)				
151 SOUTHALL LANE									
SUITE 23	-			83					
MAITLAND FL 32751-7190				84	City		85 Zip	Code	
					'	FL	Ш		
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE	Slaga e, types o primed sume o registe	and the Hard Hard Hard	ALOTE: De-			equired when reinstating) DATE			
12.		S AND DIRECTORS	(NOTE: Hag	13.	ant signature re	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	R\$ IN 12	
TITLE	DP		DELETE	1.1 TITLE			Change	RS IN 12	
NAME	KNIGHT, PATRICK	_		1.2 NAME				Į.	
STREET ADDRESS	151 SOUTHHALL LANE,	STF 230		1.3 STREET	ADDRESS				
CITY-ST-ZIP	MAITLAND FL 32751	01L. L00		1.4 CITY-S					
TITLE	DV		DELETE	2.1 TITLE	4.4		Change	☐ Addition	
NAME	SMITH, RALPH JR.			2.2 NAME					
STREET ADDRESS	151 SOUTHHALL LANE,	STF. 230		2.3 STREET	ADDRESS				
CITY-ST-ZIP	MAITLAND FL 32751-719			2.4 CITY-5					
TITLE	DST		DELETE	3.1 TITLE		L.	Change	☐ Addition	
NAME	MATTHAI, KAROLINE			3.2 NAME					
STREET ADORESS	151 SOUTHHALL LANE,	STE. 230		3.3 STREET	ADDRESS				
CITY-ST-ZIP	MAITLAND FL 32751			3.4. CITY-5					
TITLE		Ĺ.	DELETE	4.1 TITLE			Change	☐ Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP			1	4.4 CITY-S	ST - ZIP				
TITLE			DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY-S	ST-ZIP				
TITLE			DELETE	6.1 TITLE			Change	☐ Addition	
NAME				6.2 NAME	l				
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S	ST-ZIP				
		D. 4. Oct. 41 1. 400	4 197 /			d in Continue \$40.07(2)(i) Florido Statistan I further part	in i shout th	o information	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 early 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.