

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005146

FILED
Apr 27, 2011
Secretary of State

Entity Name: ARROW POINTE ESTATES/ DEER RUN ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11914 FLINT POINTE PLACE
THONE, FL 33592

New Principal Place of Business:

Current Mailing Address:

11914 FLINT POINTE PLACE
THONE, FL 33592

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOLLY, TIMOTHY
11914 FLINT POINTE PLACE
THONOTOSASSA, FL 33592 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: D
Name: LAND, SCOTT
Address: 11902 FLINT POINT PL
City-St-Zip: THONOTOSASSA, FL 33592

Title: VAS
Name: SHUTE, GARY
Address: 11915 FLINT POINTE PL
City-St-Zip: THONOTOSASSA, FL 33592

Title: T
Name: DE VOE, CARI A
Address: 9910 ARROW POINTE CT
City-St-Zip: THONOTOSASSA, FL 33592

Title: PD
Name: JOLLY, TIM
Address: 11914 FLINT POINT PL
City-St-Zip: THONOTOSASSA, FL 33592

Title: D
Name: DEAN, DELIA
Address: 11906 FLINT POINTE PL
City-St-Zip: THONOTOSASSA, FL 33592

Title: D
Name: THOMPSON, ELMER W
Address: 11901 FLINT POINTE PLACE
City-St-Zip: THONOTOSASSA, FL 33592

I hereby 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 all other like empowered.

SIGNATURE: TIM JOLLY

PRE

04/27/2011

Electronic Signature of Signing Officer or Director

Date