

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001646

FILED
Apr 10, 2007
Secretary of State

Entity Name: DEAN WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PMB 345 4250 ALAFAYA TR.
SUITE 212
ORLANDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

PMB 345 4250 ALAFAYA TR.
SUITE 212
ORLANDO, FL 32765

New Mailing Address:

FEI Number: 59-3539705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LILLY BURNSIDE C/O RELIABLE PROP. MGR.
PMB 345 4250 ALAFAYA TR., SUITE 212
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

RELIABLE PROPERTY MANAGERS
4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32765 US

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: CURTIS BURNSIDE

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: COLEMAN, WILLIAM
Address: 10537 ROCKING A RUN
City-St-Zip: ORLANDO, FL 32825

Title: S () Delete
Name: REYERS, LILLIAN
Address: 10300 ROCKING A RUN
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: SNOLE, ROBERT
Address: 10305 ROCKING A RUN
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: SNOKE, ROBERT
Address: 10305 ROCKING A RUN
City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT SNOKE

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date