

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005628

FILED
Apr 03, 2008
Secretary of State

Entity Name: DEER POINT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

406 DEER POINT DR
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

406 DEER POINT DR
GULF BREEZE, FL 32561

New Mailing Address:

FEI Number: 59-3615829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHASTAIN, MARY
406 DEER POINT DR
GULF BREEZE, FL 32561 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: T () Delete
Name: CHASTAIN, MARY
Address: 406 DEER POINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: MCDANIEL, JOHN H
Address: 525 DEER POINT DR
City-St-Zip: GULF BREEZE, FL 32561

Title: DP () Delete
Name: SMITH, G. THOMAS
Address: 345 DEER POINT DR
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MARY CHASTAIN

T

04/03/2008

Electronic Signature of Signing Officer or Director

Date