

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005628

**FILED**  
**Jun 16, 2010**  
**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:**

342 DEER POINT DR  
GULF BREEZE, FL 32561

**Current Mailing Address:**

406 DEER POINT DR  
GULF BREEZE, FL 32561

**New Mailing Address:**

342 DEER POINT DR  
GULF BREEZE, FL 32561

**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:**

KELLEN, JULIE  
342 DEER POINT DR  
GULF BREEZE, FL 32561 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: JULIE KELLEN

06/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TRES  
Name: KELLEN, JULIE  
Address: 342 DEER POINT DR  
City-St-Zip: GULF BREEZE, FL 32561

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

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

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: JULIE KELLEN

TRES

06/16/2010

Electronic Signature of Signing Officer or Director

Date