2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000070027

Entity Name: DEERWOOD PLACE CORPORATION

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
9150 SW 8 AVE STE 201 MIAMI, FL 33176			•	9150 SW 87 AVE STE 201	
1910 NWII, 1 E 33170			1911/-1911, T.E. 35176		
Current Mailing Address:			New Mailing Address:		
	VE BOULEVA S, MO 63141	RD			
FEI Number	: 65-0440540	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
	BIL COLEMAN 87 AVE STE 20 33176 US				
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU					
Election Ca		nic Signature of Registered Ag g Trust Fund Contribution ().	ent	Date	
		- ,,	ADDITIONS (OLIANG	AFC TO OFFICERS AND DIDECTOR	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DP (FRANKE, WILI 8548 A GEORG MCLEAN, VA	GETOWN PIKE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	,) Delete	Title:	() Change () Addition	
Name: Address: City-St-Zip:	GREENE, ROE 11 OLD COLO ST. LOUIS, MC	NY	Name: Address: City-St-Zip:		
Title: Name:	WEYGANDT, D		Title: Name:	() Change () Addition	
Address: City-St-Zip:	621 ROCKHAN COLUMBIA, IL		Address: City-St-Zip:		
Title: Name:	S (GORDON, TRO) Delete DY W	Title: Name:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ROBERT GREENE VP 04/30/2007

221 HAWTHORNE AVENUE

ST. LOUIS, MO 63141

Address:

City-St-Zip: