

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000076744 (8)

1. Corporation Name

THE RESERVE AT DEERWOOD, INC.



Principal Place of Business

Mailing Address

222 W COMSTOCK AVE  
SUITE 101  
WINTER PARK FL 32789

222 W COMSTOCK AVE  
SUITE 101  
WINTER PARK FL 32789

2. Principal Place of Business

2a. Mailing Address

21 359 CAROLINA AVE.

26 359 CAROLINA AVE

Suite, Apt #, etc

Suite, Apt #, etc

22

27

City & State

City & State

23 WINTER PARK, FL

28 WINTER PARK, FL

Zip

Zip

Country

Country

24 32789

25 ORANGE

29 32789

30 ORANGE

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/06/1995

3a. Date of Last Report

N/A

4. FEI Number

59-3345176

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032  
Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

GODBOLD, GENE H  
222 W COMSTOCK AVE  
SUITE 101  
WINTER PARK FL 32789

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	GODBOLD, GENE H	222 W COMSTOCK AVE	WINTER PARK FL 32789	<input checked="" type="checkbox"/>
PRESIDENT	JAMES H. PUGH, JR.	359 CAROLINA AVE	WINTER PARK, FL 32789	<input type="checkbox"/>
VICE-PRESIDENT/SECY.	GREG JACOBY	359 CAROLINA AVE	WINTER PARK, FL 32789	<input type="checkbox"/>
VICE PRESIDENT	KYLE D. RIVA	359 CAROLINA AVE	WINTER PARK, FL 32789	<input type="checkbox"/>
VICE PRESIDENT	GREG BOEHMERT	359 CAROLINA AVE	WINTER PARK, FL 32789	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	Change	Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-96 407-647-4418

CR2E034 (3/96)