

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008687

Entity Name: DEERWOOD PLACE MASTER ASSOCIATION, INC.

FILED
Mar 31, 2022
Secretary of State
2535194756CC

Current Principal Place of Business:

C/O PLAZA PROPERTY SERVICES
2365 RIVERSIDE AVE
JACKSONVILLE, FL 32204

Current Mailing Address:

C/O PLAZA PROPERTY SERVICES
2365 RIVERSIDE AVE
JACKSONVILLE, FL 32204 US

FEI Number: 20-1561450

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEAUDOIN, ANDREW J
C/O PLAZA PROPERTY SERVICES
2365 RIVERSIDE AVE
JACKSONVILLE, FL 32204 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: ANDREW J BEAUDOIN

03/31/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FLETCHER, JOHN
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name SMITH, JOHN
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title TREASURER
Name GREGORY, BRENT
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name GONZALEZ, KRISTINA
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name CHERYL, CLINTON
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title SECRETARY
Name GLASGOW, SHIRLEY
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title VP
Name MONDS, CALVIN
Address C/O PLAZA PROPERTY SERVICES
 2365 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

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: JOHN FLETCHER

PRESIDENT

03/31/2022

Electronic Signature of Signing Officer/Director Detail

Date