


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90074 047 ****61.25

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1. Entity Name
 TERRACE II AT HERITAGE BAY ASSOCIATION, INC.



Principal Place of Business
 10481 SIX MILE CYPRESS PKWY
 FORT MYERS, FL 33912

Mailing Address
 10481 SIX MILE CYPRESS PKWY
 FORT MYERS, FL 33912

40041754



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01162007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
 20-5355462

Applied For
 Not Applicable

City & State

Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHIELDS, CHRISTOPHER J ESQ.
 1833 HENDRY STREET
 FORT MYERS, FL 33901

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D Delete
 NAME DEVEREAUX, MATT
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE PD Change Addition
 NAME THRON, DANIEL
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE D Delete
 NAME HAGEN, JOHN
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE VD Change Addition
 NAME SORENSEN, ANDY
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE D Delete
 NAME DEBITETTO, JOHN
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE STD Change Addition
 NAME DISTEPHANO, PAUL
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel Thron Daniel Thron 2/9/07 239-278-1177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #