

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000640

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: HEATHER GLEN PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6615 63RD STREET E  
PALMETTO, FL 34221 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 298  
ELLENTON, FL 34222 US

**New Mailing Address:**

FEI Number: 65-0390089      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

THOMPSON, STEPHEN W  
1205 MANATEE AVE  
BRADENTON, FL 34205 US

**Name and Address of New Registered Agent:**

THOMPSON, STEPHEN W  
1401 8TH AVENUE W  
BRADENTON, FL 34205 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/03/2009

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHELDON, PERLIN  
Address: 6218 68TH DR E  
City-St-Zip: PALMETTO, FL 34221

Title: PD ( ) Delete  
Name: NEVILLE, LLOYD  
Address: 6022 68TH DR E  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: OWENS, WILLIAM  
Address: 6210 68TH DR E  
City-St-Zip: PALMETTO, FL 34221

Title: ST ( ) Delete  
Name: STECK, MONA  
Address: 6612 63RD STREET E  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: SMILOWSKI, TOM  
Address: 6801 67TH ST CIR E  
City-St-Zip: PALMETTO, FL 34221

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PERLIN, SHELDON  
Address: 6218 68TH DR E  
City-St-Zip: PALMETTO, FL 34221

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: MONA STECK

Electronic Signature of Signing Officer or Director

ST

03/03/2009

Date