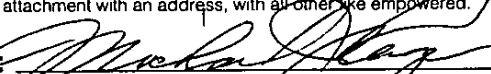


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90185 015 ****61.25

DOCUMENT # N95000005667 1. Entity Name HERON COVE AT PELICAN LANDING HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business PEGASUS PROPERTY MANAGEMENT 17595 S TAMiami #100 FORT MYERS, FL 33908 US			Mailing Address PEGASUS PROPERTY MANAGEMENT 17595 S TAMiami #100 FORT MYERS, FL 33908 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0698960	
				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		
EATON, THOMAS E PEGASUS PROPERTY MGMT 17595 S. TAMiami TR. -100 FORT MYERS, FL 33908			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, 2005		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	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	RAGO, MIKE		NAME		
STREET ADDRESS	3501 HERON COVE CT.		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS, FL 34134		CITY - ST - ZIP		
TITLE	STD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	RICE, DARLE		NAME	SD RUSSELL, RICHARD	
STREET ADDRESS	3566 HERON COVE ST.		STREET ADDRESS	25212 PELICAN CREEK #102	
CITY - ST - ZIP	BONITA SPRINGS, FL 34134		CITY - ST - ZIP	BONITA SPRINGS, FL 34134	
TITLE	VPD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	RODRIQUEZ, WALTER		NAME		
STREET ADDRESS	3537 HERON COVE CT.		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS, FL 34134		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☒ Addition	
NAME			NAME	TD MAHAFFAY, BARBARA	
STREET ADDRESS			STREET ADDRESS	3722 HALDENMAN CREEK DR.	
CITY - ST - ZIP			CITY - ST - ZIP	NAPLES, FL 34112	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/23/05 239-495-6187		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		