# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 24, 2005**
**Secretary of State**

DOCUMENT# N99000006462

**Entity Name:** HEATHER GLEN AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

PROPERTY FIRST, INC.
PO BOX 4656
WINTER PARK, FL 32793 US

**New Principal Place of Business:**

**Current Mailing Address:**

PROPERTY FIRST, INC.
P.O. BOX 4656
WINTER PARK, FL 32793

**New Mailing Address:**

**FEI Number: 59-3616768** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PALMER, BETH
PROPERTY FIRST, INC.
13627 DORNOCH DRIVE
ORLANDO, FL 32828 US

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

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 — Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: PEDROZA, MARTHA
Address: 1532 CAREY GLEN CIR
City-St-Zip: ORLANDO, FL 32824

Title: VPD ( ) Delete
Name: DEL VALLE, SAMFEITZ
Address: 1543 CAREY GLEN CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: SD ( ) Delete
Name: JARAMILLO, MATTA
Address: 1243 CAREY GLEN CIRCLE
City-St-Zip: ORLANDO, FL 32824

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

Title: PD (X) Change ( ) Addition
Name: RIVERA, RAMON
Address: 1357 CAREY GLEN CIR
City-St-Zip: ORLANDO, FL 32824

Title: VPD (X) Change ( ) Addition
Name: RIVERA, ARMANO
Address: 1429 CAREY GLEN CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change ( ) Addition
Name: APONTE, HORACIA
Address: 1416 CAREY GLEN CIRCLE
City-St-Zip: ORLANDO, FL 32824

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAMON RIVERA PD 04/24/2005

Electronic Signature of Signing Officer or Director — Date