

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006069

FILED
Jun 08, 2006
Secretary of State

Entity Name: HERITAGE ISLE RESIDENTIAL VILLAGES ASSOCIATION, INC.

Current Principal Place of Business:

4087 U.S. HIGHWAY 1 SOUTH
SUITE 3
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

4087 U.S. HIGHWAY 1 SOUTH
SUITE 3
ROCKLEDGE, FL 32955 US

New Mailing Address:

1802 N. ALAFAYA TRAIL
SUITE 108
ORLANDO, FL 32826 US

FEI Number: 20-1349557 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARTER, KATHY
4087 U.S. HIGHWAY 1 SOUTH
SUITE 3
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

SURFACE, FRANK
1802 N. ALAFAYA TRAIL
SUITE 108
ORLANDO, FL 32826 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: FRANK SURFACE

06/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GANGWISCH, EDWARD
Address: 4087 US HWY 1 SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

Title: P () Delete
Name: RAMSEY, LAUREN
Address: 4087 US HWY 1 SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

Title: T () Delete
Name: ANDERSON, STEWART
Address: 4087 US HWY 1 SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete
Name: HERMAN, DANIEL
Address: 4087 US HWY 1 SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

Title: D (X) Delete
Name: JACKSON, CRYSTAL
Address: 4087 US HWY 1 SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAUREN RAMSEY

P

06/08/2006

Electronic Signature of Signing Officer or Director

Date