

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702741

FILED
Mar 09, 2009
Secretary of State

Entity Name: ESTERO HEIGHTS IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1023
ESTERO, FL 33928

New Principal Place of Business:

4791 PALMETTO TERRACE
ESTERO, FL 33928

Current Mailing Address:

P.O. BOX 1023
ESTERO, FL 33928

New Mailing Address:

P.O. BOX 1023
ESTERO, FL 33929

FEI Number: 59-6176862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLF, JEFFREY
4791 PALMETTO TERRACE
ESTERO, FL 33928 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: P () Delete
Name: NEWBERRY, DON
Address: 4946 MEDERIA LANE
City-St-Zip: ESTERO, FL 33928

Title: VD () Delete
Name: FRETWELL, GREG
Address: 20881 PINE TREE LANE
City-St-Zip: ESTERO, FL 33928

Title: SD () Delete
Name: WEYER, LINDA
Address: 4947 RIVERSIDE DRIVE
City-St-Zip: ESTERO, FL 33928

Title: TD () Delete
Name: WOLF, JEFFREY
Address: 4791 PALMETTO TERRACE
City-St-Zip: ESTERO, FL 33928

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:

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: JEFFREY T. WOLF

TD

03/09/2009

Electronic Signature of Signing Officer or Director

Date