
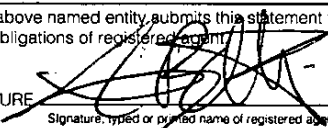
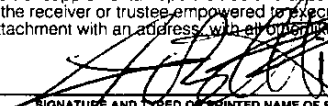


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90049 004 ****61.25

DOCUMENT # 731473 1. Entity Name HEATHER HALL ASSOCIATION, INC.			
Principal Place of Business 4747 AVON COURT ST CLOUD, FL 34769		Mailing Address BOARD OF DIRECTORS 4747 AVON COURT SAINT CLOUD, FL 34769	
2. Principal Place of Business - No P.O. Box # 4747 Avon Court Suite, Apt. #, etc.		3. Mailing Address 4747 Avon Court Suite, Apt. #, etc.	
City & State Saint Cloud FL 34769 Zip 34769 Country U.S.A.		City & State Saint Cloud FL Zip 34769 Country USA	
4. FEI Number 59-1640150		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SOKOLOVIC, MATTHEW THOMAS 4729 ESSEX COURT ST.CLOUD, FL 34769		7. Name and Address of New Registered Agent Name Thomas C. Battiato Street Address (P.O. Box Number is Not Acceptable) 4747 Avon Court City Saint Cloud FL Zip Code 34769	
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  (NOTE: Registered Agent signature required when reinstating) DATE 2/12/07			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 SOKOLOVIC, MATTHEW 4729 ESSEX COURT SAINT CLOUD, FL 34769	TITLE	President Thomas C. Battiato 4747 Avon Court Saint Cloud, FL 34769
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	VD SUSOL, VICTOR 4726 AVON COURT SAINT CLOUD, FL 34769	TITLE	Vice-President Walter Turner Sr. 4740 Kilt Court Saint Cloud, FL 34769
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	SD SANOI, ETHAN 4714 KILT COURT SAINT CLOUD, FL 34769	TITLE	Treasurer Lori Case 4731 Avon Court Saint Cloud, FL 34769
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	TD HOEKMAN, EVELEYN 4749 KILT COURT SAINT CLOUD, FL 34769	TITLE	Secretary Jessinia Ortiz-Robertson 4746 Avon Court Saint Cloud, FL 34769
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D KELLY, EDWARD 4743 AVON COURT SAINT CLOUD, FL 34769	TITLE	Director Lynda Cray 4575 Kissimmee Park Road Saint Cloud, FL 34769
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE		TITLE	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 11 if changed, or on an attachment with an address, with an officer empowered.			
SIGNATURE: 		Thomas C. Battiato 2/12/07 407-465-4514	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	