

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90012 049 ****61.25

DOCUMENT # 744548 1. Entity Name HENDRY CREEK HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 15666 LIGHTBLUE CIRCLE FORT MYERS, FL 33908			Mailing Address C/O PEPITONE REALTY MGMT SVCS. CORP. 13451 MCGREGOR BLVD SUITE 32 FORT MYERS, FL 33919 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2157527	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent PEPITONE REALTY MANAGEMENT SERVICES 13451 MCGREGOR BLVD SUITE 32 FORT MYERS, FL 33919				7. Name and Address of New Registered Agent Name CAMPBELL, PHILIP Street Address Professionally Yours, Inc. 1342 SE 46TH LANE, #3 CAPE CORAL, FL 33904 City _____	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, 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)					
Filing Fee is \$61.25 Due by May 1, 2004		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 NAME STREET ADDRESS CITY - ST - ZIP	VPD RORRER LARRY 7226 HENDRY CREEK DR FT. MYERS, FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WELLS, FRANCIS 7220 HENDRY CREEK DR FT. MYERS, FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition WELLS, FRANCIS 7220 HENDRY CREEK DR FT. MYERS, FL 33908	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MARK, STREATER 7265 HEAVEN LANE FORT MYERS, FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition VD COOPER, JAY CALVERT 15481 CHLOE CIRCLE FORT MYERS, FL 33908	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition STD BENITEZ, OMA 15499 THORY COURT FT MYERS, FL 33908	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					