

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749348

FILED
Jan 28, 2009
Secretary of State

Entity Name: HERITAGE RIDGE SOUTH PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8201 S E CONSTITUTION BLVD.
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

8201 S E CONSTITUTION BLVD.
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 59-2211955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOIEY & FATTORI, FMS, INC.
5180 SE SWEETBRIER TERR
HOBE SOUND, FL 33455 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: OTTEN, RICHARD
Address: 8051 SHENONDOAH DR.
City-St-Zip: HOBE SOUND, FL 33455

Title: VP () Delete
Name: RAYNOR, JUDITH
Address: 6975 AMENDMENT DR.
City-St-Zip: HOBE SOUND, FL 33455

Title: S () Delete
Name: ERROL, BOBB
Address: 7485 INDEPENDENCE AVE
City-St-Zip: HOBE SOUND, FL 33455

Title: TRES () Delete
Name: RICKNER, JAMES
Address: 7425 SE INDEPENDANCE
City-St-Zip: HOBE SOUND, FL 33455

Title: ED () Delete
Name: COOK, DONALD
Address: 7925 INDEPENDENCE AVE
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: PEABODY, ED
Address: 8003 SE SARATOGA DR
City-St-Zip: HOBE SOUND, FL 33455

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:

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: RICHARD OTTEN

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date