2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749887

CLEARWATER, FL 33762

FILED Mar 31, 2009 Secretary of State

Entity Name: HEATHER RIDGE WEST II ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O CMC, INC. 4585 140TH AVE NORTH

4175 EAST BAY DR. #205 **SUITE 1012**

CLEARWATER, FL 33764 US CLEARWATER, FL 33762 US

Current Mailing Address: New Mailing Address:

4585 140TH AVE N. 4585 140TH AVE NORTH 1012

SUITE 1012

CLEARWATER, FL 33762 US

FEI Number: 59-2987586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC. 4585 140TH AVE. NORTH SUITE 1012 CLEARWATER, FL 33762

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SULLIVAN, SHEILA SULLIVAN, SHEILA Name: Name: 1415 DOOLITTLE LN #105 Address: 1415 DOOLITTLE LN #105 Address:

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: () Delete Title: (X) Change () Addition Name: CONNOLLY, GINGER Name: SLATER, CARL

Address: 1415 DOOLITTLE LANE, #304 Address: 1415 DOOLITTLE LANE, #207

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: () Delete Title: (X) Change () Addition

MASON, BEVERLY Name: MASON, BEVERLY Name: 1415 DOOLITTLE LN #307 Address: 1415 DOOLITTLE LN #307 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

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: SHEILA SULLIVAN Ρ 03/31/2009