2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755497

FILED Apr 22, 2009 Secretary of State

Entity Name: HERON HARBOUR CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
7500 40TH BRADENT	AVE W ON, FL 34209	US					
Current Mailing Address:				New Mailing Address:			
PO BOX 16 HOLMES B	607 EACH, FL 34	209 US					
FEI Number:	59-2011960	FEI Number Applied For()	FEI Numb	er Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
6400 MANA	EACH PROPE ATEE AVE W S ON, FL 34209	STE G					
The above in the State		submits this statement for the	e purpose of o	changing its	s registered o	office or registered agent, or both,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered A	gent			Date	
OFFICERS AND DIRECTORS:			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VP () WEBER, MICHA 7500 40TH AVE BRADENTON, F	NUE W	A A	itle: lame: lddress: city-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	P () SCHRUMPF, EL 7500 40TH AVE BRADENTON, F	W #403	A A	itle: lame: ddress: city-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	SUPLEE, GEOF 7500 40TH AVE BRADENTON, F	W #305 FL 34209	N A C	ītle: lame: ddress: Dity-St-Zip:	MILLER, TOM 7500 40TH AVE BRADENTON, I	FL 34209	
Title: Name: Address: City-St-Zip:	S () CREMASCHI, K 7500 40TH AVE BRADENTON, F	NUE W #501	N A	itle: lame: \ddress: City-St-Zip:	D (X O'BRIEN, SCO' 7500 40TH AVE BRADENTON, I	ENUE W #201	
Title: Name: Address: City-St-Zip:	D () CRITELLI, NICH 7500 40TH AVE BRADENTON, F	NUE W #102	N A	itle: lame: ddress: City-St-Zip:	T (X CRITELLI, NICH 7500 40TH AVE BRADENTON, I	ENUE W #102	
Title: Name: Address: City-St-Zip:	()	Delete	A A	itle: lame: .ddress: City-St-Zip:	CONDRON, TO	E AVE W STE G	

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: TOM CONDRON M 04/22/2009