

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755505

FILED  
Mar 13, 2012  
Secretary of State

**Entity Name:** HENDERSON CREEK VILLAGE CONDOMINIUM ASSOCIATION,INC.

**Current Principal Place of Business:**

900 HENDERSON CREEK DR.  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALLIANCE MGMT  
4100 CORPORATE SQUARE, SUITE 155  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 65-0013548      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KNOLL, RICHARD H  
4100 CORPORATE SQUARE  
SUITE #155  
NAPLES, FL 34104 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  
Name: NEY, JOHN  
Address: 900 HENDERSON CREEK DRIVE #103  
City-St-Zip: NAPLES, FL 34114

Title: T  
Name: HINTZE, LEO  
Address: 900 HENDERSON CREEK DRIVE #119  
City-St-Zip: NAPLES, FL 34114

Title: S  
Name: MORRIS, BEATRIZ  
Address: 900 HENDERSON CREEK DRIVE #102  
City-St-Zip: NAPLES, FL 34114

Title: VP  
Name: RAFFERTY, SUE  
Address: 900 HENDERSON CREEK DR., #110  
City-St-Zip: NAPLES, FL 34114

Title: D  
Name: WELTER, JOHN  
Address: 304 ANCE ACRES LANE  
City-St-Zip: REEDS SPRING, MO 65737

I hereby 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 all other like empowered.

SIGNATURE: JOHN NEY

P

03/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date