


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2007 8:00 am
Secretary of State

03-07-2007 90014 005 ****61.25

DOCUMENT # 770880 1. Entity Name HEATHER RIDGE VILLAS IX ASSOCIATION, INC.					
Principal Place of Business 251 WINDWARD PASSAGE STE F CLEARWATER BEACH, FL 33767 US			Mailing Address 251 WINDWARD PASSAGE STE F CLEARWATER BEACH, FL 33767 US		
2. Principal Place of Business - No P.O. Box # 40347 US 19 NORTH Suite, Apt. #, etc. SUITE 201 City & State TARPON SPRINGS, FL		3. Mailing Address P.O. Box 695 Suite, Apt. #, etc. City & State TARPON SPRINGS, FL		4. FEI Number 59-2987574	
Zip 34689		Country PIWELLAS		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NOBLES MANAGEMENT 251 WINDWARD PASSAGE STE F CLEARWATER BEACH, FL 33767				7. Name and Address of New Registered Agent Name IRENE KARAGIANIS Street Address (P.O. Box Number is Not Acceptable) 40347 US 19 NORTH, SUITE 201 City TARPON SPRINGS FL Zip Code 34689	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Irene Karagianis</i></u> IRENE KARAGIANIS 2-26-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PDS ELLSWORTH, VINCENT 2190 EISEN HOWER DR DUNEDIN, FL 34698	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPBT CHAKERES, ANGELO 2197 NIMITZ DR DUNEDIN, FL 34698	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRANGE, BILL 2188 EISENHOWER DUNEDIN, FL 34698	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Bugha Chaker</i></u> 2-27-07 727-942-4755 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small>		

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Applied For
Not Applicable