

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003765

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: THE HERITAGE PROPERTIES OF SANTA ROSA, INC.

## Current Principal Place of Business:

211 E DOYLE STREET  
TOCCOA, GA 30577

## New Principal Place of Business:

1626 JEURGENS COURT  
NORCROSS, GA 30093

## Current Mailing Address:

211 E DOYLE STREET  
TOCCOA, GA 30577

## New Mailing Address:

FEI Number: 56-2282633      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CFO ( ) Delete  
Name: WREN, GREG M  
Address: 211 EAST DOYLE ST  
City-St-Zip: TOCCOA, GA 30577

Title: CEOC ( ) Delete  
Name: PRUITT, NEIL L JR  
Address: 211 EAST DOYLE ST  
City-St-Zip: TOCCOA, GA 30577

Title: DS ( ) Delete  
Name: PRUITT, NANCY W  
Address: 211 EAST DOYLE ST  
City-St-Zip: TOCCOA, GA 30577

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change ( ) Addition  
Name: WREN, GREGORY M  
Address: 1626 JEURGENS COURT  
City-St-Zip: NORCROSS, GA 30093

Title: CEOC (X) Change ( ) Addition  
Name: PRUITT, NEIL L JR  
Address: 1626 JEURGENS COURT  
City-St-Zip: NORCROSS, GA 30093

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY M. WREN

CFO

04/22/2009

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

\_\_\_\_\_ Date