

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90020 011 ****61.25

DOCUMENT # N00000000549

1. Entity Name

TERRACE II AT HERITAGE COVE ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O TROPICAL ISLES MANAGEMENT SERVICE
12734 KENWOOD LANE, SUITE 49
FORT MYERS FL 33907-5639

C/O TROPICAL ISLES MANAGEMENT SERVICE
12734 KENWOOD LANE, SUITE 49
FORT MYERS FL 33907-5639



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-0984179

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROPICAL ISLES MGMT SVCS, INC.
12734 KENWOOD LANE
SUITE 49
FORT MYERS FL 33907

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and (if applicable, (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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

TSD ☒ Delete
NAME WALKER, SAMUEL
STREET ADDRESS 14111 BRANT POINT CIR #217
CITY-ST-ZIP FORT MYERS FL 33919

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

VD ☒ Delete
NAME FENNESSEY, GERRY
STREET ADDRESS 14111 BRANT POINT CIR #212
CITY-ST-ZIP FORT MYERS FL 33919

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

PD ☐ Delete
NAME DANFORTH, PHILIP
STREET ADDRESS 14111 BRANT POINT CIR #211
CITY-ST-ZIP FORT MYERS FL 33919

☒ Change ☐ Addition
~~PD DANFORTH, PHILIP~~
~~14111 BRANT POINT CIR #211~~
~~FORT MYERS FL 33919~~

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition
VD
NAME BILL MULLER
STREET ADDRESS 14111 BRANT POINT CIR #235
CITY-ST-ZIP FORT MYERS FL 33919

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition
TSD
NAME BOB LAITY
STREET ADDRESS 14111 BRANT POINT CIR #231
CITY-ST-ZIP FORT MYERS FL 33919

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Philip Danforth* Philip DANFORTH 3/5/07 239-415-9500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #