

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000549

FILED
Mar 07, 2009
Secretary of State

Entity Name: TERRACE II AT HERITAGE COVE ASSOCIATION, INC.

Current Principal Place of Business:

C/O TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 339075639

New Principal Place of Business:

14041 BRANT POINT CIRCLE
FORT MYERS, FL 33919 US

Current Mailing Address:

C/O TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 339075639

New Mailing Address:

14041 BRANT POINT CIRCLE
FORT MYERS, FL 33919 US

FEI Number: 65-0984179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

TROPICAL ISLES MGMT SVCS, INC.
14041 BRANT POINT CIRCLE
FORT MYERS, FL 33919 US

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:

03/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TSD () Delete
Name: LAITY, BOB
Address: 14111 BRANT POINT CIR #231
City-St-Zip: FORT MYERS, FL 33919

Title: VD () Delete
Name: MULLER, BILL
Address: 14111 BRANT POINT CIR #235
City-St-Zip: FORT MYERS, FL 33919

Title: PD () Delete
Name: DANFORTH, PHILIP
Address: 14111 BRANT POINT CIR #211
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: LAITY, BOB
Address: 14111 BRANT POINT CIR #231
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: PHILIP DANFORTH

PD

03/07/2009

Electronic Signature of Signing Officer or Director

Date