2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002520

Entity Name: HERON BAND PARENTS ASSOCIATION, INC.

FILED Aug 26, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
18500 THREE OAKS PARKWAY FT MYERS, FL 33912				
Current Mailing Address:			New Mailing Address:	
18500 THREE OAKS PARKWAY FT MYERS, FL 33912				
FEI Number: 65-0911107 FEI Number Applied For () FEI Nu		mber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CASTELLANO, MARK J 1816 NE 24TH PLACE CAPE CORAL, FL 33993 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:				
	Electronic	Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () E RODERICK, HALI 7378 SEA ISLANI FORT MYERS, FI	D RD	Title: Name: Address: City-St-Zip:	D/P (X) Change () Addition TROULIS, LISA 17400 STEPPING STONE DR FORT MYERS, FL 33912
Title: Name: Address: City-St-Zip:	D () E THOMAS, COLEE 9778 COUNTRY FORT MYERS, FI	DAKS DR	Title: Name: Address: City-St-Zip:	D/V (X) Change () Addition STAPLETON, JAN 9682 SPRING RIDGE CIR ESTERO,FL, FL 33928
Title: Name: Address: City-St-Zip:	D () C OWEN, LETHA 18573 WISTERIA FT MYERS, FL 3		Title: Name: Address: City-St-Zip:	D/T (X) Change () Addition DONATH, DONNA 17497 LEBANON RD FT MYERS,FL, FL 33912
Title: Name: Address: City-St-Zip:	D () E POLK, ANTHONY 6117 DEER RUN FORT MYERS, FI	I	Title: Name: Address: City-St-Zip:	D/S (X) Change () Addition SCHELL, YVONNE 21601 BELHAVEN WAY ESTERO,FL, FL 33928
Title: Name: Address: City-St-Zip:	D (X) E MULLER, MATTH 5782 BEACHWOO FT MYERS, FL 3	OD TR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () C CASTELLANO, M 1816 NW 24TH P CAPE CORAL, FL	L	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA DONATH D/T 08/26/2004