


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 8:00 am
Secretary of State

01-10-2007 90044 009 ****61.25

DOCUMENT # N01000002356 1. Entity Name HERON'S WATCH HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 8615 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210			Mailing Address 8615 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address PO Box 1004			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Cortez, FL			
Zip	Country	Zip 34215-1004	Country	4. FEI Number 65-1135600	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WIECHMANN, BONNIE 8615 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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>Bonnie Wiechmann</i></u> 1/6/07 <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	PD MAROHL, MARYBETH 8646 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, DAVID 8616 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WIECHMANN, BONNIE 8615 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MUEHE, ED 8647 46TH AVENUE CIRCLE WEST BRADENTON, FL 34210	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; padding: 5px;"> S DAN CRAW 8607 46TH AVE CIR W BRADENTON, FL 34210 </div>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; padding: 5px;"> S DAN CRAW 8607 46TH AVE CIR W BRADENTON, FL 34210 </div>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; padding: 5px;"> S DAN CRAW 8607 46TH AVE CIR W BRADENTON, FL 34210 </div>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
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>Bonnie Wiechmann</i></u>			1/6/07		941-792-1530
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>