

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003363

FILED  
Mar 23, 2011  
Secretary of State

**Entity Name:** WATER'S EDGE VILLAS AT HERITAGE OAK PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

1063 LIVE OAK CIRCLE  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

19520 HERITAGE OAK BLVD  
PORT CHARLOTTE, FL 33948 FL

**Current Mailing Address:**

1063 LIVE OAK CIRCLE  
PORT CHARLOTTE, FL 33948

**New Mailing Address:**

19520 HERITAGE OAK BLVD  
PORT CHARLOTTE, FL 33948 FL

**FEI Number:** 65-1119287

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JORDAN, ALBERT  
1053 LIVE OAK CIRCLE  
PORT CHARLOTTE, FL 33948 US

**Name and Address of New Registered Agent:**

MCINTYRE, JULIA  
19520 HERITAGE OAK BLVD  
PORT CHARLOTTE, FL 33948 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: JULIA MCINTYRE

03/23/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCINTYRE, JULIA  
Address: 1053 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

Title: D  
Name: NEILL, CECIL  
Address: 1063 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

Title: VP  
Name: SAUR, PAUL  
Address: 1061 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

Title: D  
Name: DANNER, PAMELA  
Address: 1071 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

Title: TD  
Name: WEICHSELBAUM, HELGA  
Address: 1011 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

Title: S  
Name: TOPPING, SHARON  
Address: 1033 LIVE OAK CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948 FL

I hereby 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 all other like empowered.

SIGNATURE: JULIA MCINTYRE

P

03/23/2011

Electronic Signature of Signing Officer or Director

Date