2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004176

FILED Apr 01, 2009 Secretary of State

Entity Name: VERANDA VI AT HERITAGE OAKS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: ARGUS PROPERTY MANAGEMENT 2477 STICKNEY PT. RD., #118A SARASOTA, FL 34231 **New Mailing Address: Current Mailing Address:** ARGUS PROPERTY MANAGEMENT 2477 STICKNEY PT. RD., #118A SARASOTA, FL 34231 FEI Number: 65-1153214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CROSS, DARLENE C/O ARGUS PROPERTY MANAGEMENT 2477 STICKNEY PT. RD., #118A SARATOTA, FL 34231 ÚS 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: () Delete () Change () Addition CURRAN, JAMES Name: Name: 5360 HYLAND HILLS AVE, #2612 Address: Address: City-St-Zip: SARASOTA, FL 34241 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FARWELL, DEAN Name: Address: 19 WISPERING SANDS DRIVE, #201N Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: Title: Title: (X) Change () Addition () Delete GORMLEY, F. GORMLEY, JAMES Name: Name: 3166 DICK WILSON DRIVE Address: 607 PAWNEE LA Address: City-St-Zip: FRANKLIN LAKES, NJ 07417 City-St-Zip: SARASOTA, FL 34240 Title: AS () Delete Title: () Change () Addition Name: CROSS, DARLENE Name: Address: 2477 STICKNEY PT RD., #118A Address: City-St-Zip: SARASOTA, FL 34231 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: DARLENE CROSS AS 04/01/2009