

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01941

FILED
Apr 14, 2009
Secretary of State

Entity Name: HERON LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

181 CENTER RD
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

181 CENTER RD
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 59-2434238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER RD
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SMALLEY, REED
Address: 3009 SEAWIND CIR
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: SHEEHAN, L.J.
Address: 3013 SEAWIND CIRCLE
City-St-Zip: VENICE, FL

Title: PD () Delete
Name: MARTINO, JOSEPH
Address: 3022 SAIL POINTE CIRCLE
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: CASTELLON, JOSEPH
Address: 3007 SEAWIND CIRCLE
City-St-Zip: VENICE, FL 34293

Title: VPD () Delete
Name: KALDOR, DARREL
Address: 3027 SEAWIND CIR
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMSON, CHARLES
Address: 3000 SAIL POINTE CIRCLE
City-St-Zip: VENICE, FL 34293

Title: SD (X) Change () Addition
Name: SHEEHAN, L.J.
Address: 3013 SEAWIND CIRCLE
City-St-Zip: VENICE, FL 34293

Title: PD (X) Change () Addition
Name: DEMARTINO, JOSEPH
Address: 3022 SAIL POINTE CIRCLE
City-St-Zip: VENICE, FL 34293

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: JOSEPH DEMARTINO

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date