

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002098

FILED
Apr 27, 2008
Secretary of State

Entity Name: BLUE HERON POND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

KEYS CALDWELL, INC.
1162 INDIAN HILLS BLVD.
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

KEYS CALDWELL, INC.
1162 INDIAN HILLS BLVD.
VENICE, FL 34293

New Mailing Address:

FEI Number: 54-2093673 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KEYS CALDWELL, INC.
1162 INDIAN HILLS BLVD.
VENICE, FL 34292 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: TD () Delete
Name: PINSKI, IRENE
Address: 145 WADING POND DR
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: SCHNITZLER, EDWARD
Address: 176 WADING POND DR
City-St-Zip: VENICE, FL 34292

Title: PD () Delete
Name: SOENTGEN, ED
Address: 117 WADING BLVD DR
City-St-Zip: VENICE, FL 34292

Title: SD (X) Delete
Name: NANFITO, JOE
Address: 128 WADING BIRD DR
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: SHILLING, CHARLES
Address: 240 GREYWING COURT
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SCHNITZLER, EDWARD
Address: 176 WADING POND DR
City-St-Zip: VENICE, FL 34292

Title: PD (X) Change () Addition
Name: TESTA, JOSEPH
Address: 196 WADING BIRD DRIVE
City-St-Zip: VENICE, FL 34292

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ITTERMANN, DAVID
Address: 160 WADING BIRD DRIVE
City-St-Zip: VENICE, FL 34292

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 TESTA

PRES

04/27/2008

Electronic Signature of Signing Officer or Director

Date