

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002962

FILED
Apr 23, 2009
Secretary of State

Entity Name: HEATHERSTONE AT ROOKERY POINTE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S. #215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S. #215
NAPLES, FL 34104

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE 215
NAPLES, FL 34104

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE 215
NAPLES, FL 34104

FEI Number: 81-0553913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUSEL, JAMIE
1104 N. COLLIER BLVD.
MARCO ISLAND, FL 34135 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: P () Delete
Name: CUSTA, JOSEPH
Address: 9712 HEATHERSTONE LAKE COURT #6
City-St-Zip: ESTERO, FL 33928

Title: ST () Delete
Name: BENNETT, DAVID
Address: 9720 HEATHERSTONE RIVER COURT
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: JOHNSON, ALEXIA
Address: 20012 HEATHERSTONE WAY #1
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCINTIRE, SAMUEL
Address: 20036 HEATHERSTONE WAY #1
City-St-Zip: ESTERO, FL 33928

Title: S (X) Change () Addition
Name: CHAMBERLAIN, JENNIFER
Address: 20012 HEATHERSTONE WAY #6
City-St-Zip: ESTERO, FL 33928

Title: VPT (X) Change () Addition
Name: BENNETT, DAVID
Address: 9720 HEATHERSTONE RIVER COURT
City-St-Zip: ESTERO, FL 33928

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: SAMUEL MCINTIRE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date