

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003938

FILED
Apr 25, 2005
Secretary of State

Entity Name: NOBLE HERON VILLA ASSOCIATION, INC.

Current Principal Place of Business:

4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103

New Principal Place of Business:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

Current Mailing Address:

4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103

New Mailing Address:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

FEI Number: 02-0606142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREGORY, C. NEIL ESQ.
850 PARK SHORE DR.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

LUTGERT, KURT
2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105 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: KURT LUTGERT

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVPS () Delete
Name: MULLINS, LARRY
Address: 2600 GOLDEN GATE PKWY STE 109
City-St-Zip: NAPLES, FL 34105

Title: DVPS () Delete
Name: BAKER, RICHARD
Address: 4200 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: DP () Delete
Name: LUTGERT, KURT
Address: 2600 GOLDEN GATE PKWY STE 109
City-St-Zip: NAPLES, FL 34105

Title: DVPT () Delete
Name: GUTMAN, HOWARD
Address: 4200 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change () Addition
Name: MULLINS, LARRY
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

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

Title: DP (X) Change () Addition
Name: LUTGERT, KURT
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

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 Section 119.07(3)(i), 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: KURT LUTGERT

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04/25/2005

Electronic Signature of Signing Officer or Director

Date