2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002070

FILED Mar 08, 2005 Secretary of State

Entity Name: HERITAGE LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O ALL FLORIDA REALTY SERVICES, INC 13017 PARK BLVD., NORTH

11902 RACE TRACK ROAD

TAMPA, FL 33626

Current Mailing Address:

SEMINOLE, FL 33776

New Mailing Address:

C/O ALL FLORIDA REALTY SERVICES, INC 13017 PARK BLVD., NORTH

11902 RACE TRACK ROAD

TAMPA, FL 33626

SEMINOLE, FL 33776 FEI Number: 65-1180616

Certificate of Status Desired ()

FEI Number Not Applicable ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THE PROPERTY GROUP OF CENTRAL FLORIDA, INC

MARTINI, GREGORY C/O SACHER, MARTINI & SACHER, P.A. 2655 LEJEUNE RD STE 1101

11902 RACE TRACK ROAD

TAMPA, FL 33626

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: LEIGH SLEMENT

03/08/2005

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DPT () Delete MARTINI, GREGORY T Name:

2655 LEJEUNE RD STE 1101 Address: City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete PETTINELLA, JOSEPH A Name:

Address: 1136 RT 9 STE U-1 HAMPTON BUSINESS CENTER

City-St-Zip: WAPPINGERS FALLS, NY 12590

Title: () Delete

RICHARDSON, NICOLE Name: Address: 2560 TAMPA ROAD City-St-Zip: PALM HARBOR, FL 34684 (X) Change () Addition

MARTINI, GREGORY T Name: Address: 2655 LEJEUNE RD STE 1101 City-St-Zip: CORAL GABLES, FL 33134

Title: (X) Change () Addition

Name: PETTINELLA, JOSEPH A

Address: 1136 RT 9 STE U-1 HAMPTON BUSINESS CENTER

City-St-Zip: WAPPINGERS FALLS, NY 12590

Title: (X) Change () Addition

RICHARDSON, NICOLE Name: 3260 HAVILAND CT # 102 Address: City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the 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: JOE PETTINELLA DP 03/08/2005