

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004136

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** TERRACE II AT HERITAGE POINTE ASSOCIATION, INC.

**Current Principal Place of Business:**

12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907

**New Principal Place of Business:**

11691 GATEWAY BLVD.  
SUITE 203  
FORT MYERS, FL 33913

**Current Mailing Address:**

12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907

**New Mailing Address:**

11691 GATEWAY BLVD.  
SUITE 203  
FORT MYERS, FL 33913

**FEI Number:** 65-1189874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIRES, JAN  
12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

SARVER, REBECCA  
11691 GATEWAY BLVD.  
SUITE 203  
FORT MYERS, FL 33913 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: REBECCA SARVER

04/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: DOYLE, BRUCE  
Address: 16605 LAKE CIRCLE DRIVE, #338  
City-St-Zip: FORT MYERS, FL 33908

Title: PD ( ) Delete  
Name: MOORE, RICHARD  
Address: 16605 LAKE CIRCLE DR # 347  
City-St-Zip: FORT MYERS, FL 33908

Title: STD ( ) Delete  
Name: GARCIA, RICHARD  
Address: 16615 LAKE CIRCLE DR, # 423  
City-St-Zip: FORT MYERS, FL 33908

Title: ASM (X) Delete  
Name: SPIERS, JAN CAM  
Address: 12734 KENWOOD LANE, SUITE 49  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: ARRUDA, ROBERT  
Address: 16605 LAKE CIRCLE DRIVE, #348  
City-St-Zip: FORT MYERS, FL 33908

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

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: RICHARD MOORE

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date