2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006
Secretary of State

DOCUMENT# N03000008001

Entity Name: THE FAIRWAYS OF HERONS GLEN ASSOCIATION, INC.

Current Principal Place of Business:

2260 CORONA DEL SIRE
N FT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

2260 CORONA DEL SIRE
N FT MYERS, FL 33917

New Mailing Address:

FEI Number: 20-0965506 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY ST
FT MYERS, FL 33901 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: DP ( ) Delete
Name: METROINA, DON
Address: 2250 AVENION DEL VERA
City-St-Zip: N FT MYERS, FL 33917

Title: DVS ( ) Delete
Name: LAPLANTE, MICHAEL J
Address: 2260 CORONA DEL SIRE
City-St-Zip: N FT MYERS, FL 33917

Title: DT ( ) Delete
Name: MEADVIN, KEN
Address: 2250 AVENION DEL VERA
City-St-Zip: N FT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGR (X) Change ( ) Addition
Name: CORDELLO, DOUG
Address: 12800 UNIVERSITY DRIVE, SUITE #400
City-St-Zip: FORT MYERS, FL 33907

Title: MGR (X) Change ( ) Addition
Name: BENDER, KATHLEEN
Address: 12800 UNIVERSITY DRIVE, SUITE #400
City-St-Zip: FORT MYERS, FL 33907

Title: MGR (X) Change ( ) Addition
Name: MEADVIN, KEN
Address: 12800 UNIVERSITY DRIVE, SUITE #400
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUG CORDELLO MGR 04/19/2006

Electronic Signature of Signing Officer or Director — Date