


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90031 013 ****61.25

DOCUMENT # N04000000466	
1. Entity Name TERRACE III AT HERITAGE POINTE ASSOCIATION, INC.	

Principal Place of Business 12734 KENWOOD LANE STE 49 FT. MYERS, FL 33907 US	Mailing Address 12734 KENWOOD LANE STE 49 FT. MYERS, FL 33907 US
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60018864

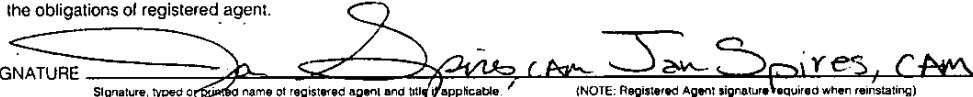
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01182006 Chg-NP CR2E037 (11/05)

4. FEI Number 51-0496788		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ROEDDING, DOUGLAS 12734 KENWOOD LANE STE 49 FT. MYERS, FL 33907		7. Name and Address of New Registered Agent Name Jan Spires Street Address (P.O. Box Number is Not Acceptable) 12734 Kenwood Ln Suite 49 City FT. Myers FL Zip Code 33907

8. 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. I am familiar with, and accept the obligations of registered agent.

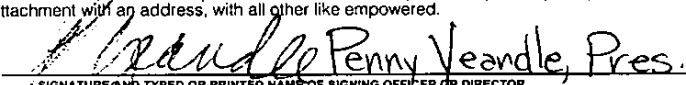
SIGNATURE  **Jan Spires, CAM** DATE **2/1/06**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NACHTMAN, ROBERT 16625 LAKE CIRCLE DR #534 FT. MYERS, FL 33908 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YEANDLE, PENNY 16635 LAKE CIRCLE DR #611 FT. MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZUCCAHO, MICHAEL 16635 LAKE CIRCLE DR #633 FT. MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASM ROEDDING, DOUG 12734 KENWOOD LANE SUITE 49 FT. MYERS, FL 33907 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Barbara MacIntosh 16625 Lake Circle Drive, Unit 538 Ft. Myers, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCINTOSH, BARBARA 16625 LAKE CIRCLE DR #538 FT. MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASM <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jan Spires, CAM 12734 Kenwood Ln, STE 52 Ft. Myers, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Penny Veandle, Pres.** Date **Feb 1/06** ²³⁹ 267-9247

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR