

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001277

FILED  
Mar 29, 2010  
Secretary of State

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

**Current Principal Place of Business:**

BCH GROUP MANAGEMENT, INC.  
1840 BOY SCOUT DRIVE, SUITE B  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

1840 BOY SCOUT DRIVE  
SUITE B  
FORT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 55-0560313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOORE, DIANA L  
1840 BOY SCOUT DRIVE  
SUITE B  
FORT MYERS, FL 33907 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: PD  
Name: CARD, MARY JO  
Address: 16585 LAKE CIRCLE DRIVE, #116  
City-St-Zip: FORT MYERS, FL 33908

Title: VPD  
Name: SWANSON, MARIANNE  
Address: 16645 LAKE CIR DR 743  
City-St-Zip: FORT MYERS, FL 33908

Title: S/TD  
Name: FREEMAN, JAMES  
Address: 16645 LAKE CIRCLE DRIVE, #726  
City-St-Zip: FORT MYERS, FL 33908

Title: ASM  
Name: DIANA MOORE, CAM  
Address: 1840 BOY SCOUT DRIVE, SUITE B  
City-St-Zip: FORT MYERS, FL 33907

I hereby 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 all other like empowered.

SIGNATURE: MARY JO CARD

PRES

03/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date