

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002443

FILED
May 02, 2007
Secretary of State

Entity Name: TERRACE V AT HERITAGE POINTE ASSOCIATION, INC.

Current Principal Place of Business:

12734 KENWOOD LN
STE 49
FORT MYERS, FL 33907

New Principal Place of Business:

11691 GATEWAY BLVD.
203
FORT MYERS, FL 33913

Current Mailing Address:

C/O TROPICAL ISLES MNGT
12734 KENWOOD LN
FT. MYERS, FL 33912

New Mailing Address:

11691 GATEWAY BLVD.
203
FT. MYERS, FL 33913

FEI Number: 51-0503329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIERS, JAN CAM
12734 KENWOOD LN
STE 52
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

S & S GOLF MANAGEMENT
11691 GATEWAY BLVD.
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

05/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: RAY, PATRICIA
Address: 16685 LAKE CR.DR. #1019
City-St-Zip: FORT MYERS, FL 33908

Title: PD () Delete
Name: TELEP, JEANNE
Address: 16685 LAKE DR. #1030
City-St-Zip: FT. MYERS, FL 33912

Title: STD () Delete
Name: KAISER, MARY
Address: 16675 LAKE CIRCLE DR. #948
City-St-Zip: FORT MYERS, FL 33908

Title: ASM () Delete
Name: SPIERS, JAN CAM
Address: 12734 KENWOOD LANE, SUITE 48
City-St-Zip: FT MYERS, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: RAY, PATRICIA
Address: 16685 LAKE CR.DR. #1019
City-St-Zip: FORT MYERS, FL 33908

Title: DVP (X) Change () Addition
Name: AMBROSE, DON
Address: 16685 LAKE DR.
City-St-Zip: FT. MYERS, FL 33912

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

Title: ASM (X) Change () Addition
Name: SARVER, REBECCA CAM
Address: 11691 GATEWAY BLVD., #203
City-St-Zip: FT MYERS, FL 33913

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: REBECCA SARVER

ASM

05/02/2007

Electronic Signature of Signing Officer or Director

Date