

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002798

FILED  
Apr 08, 2009  
Secretary of State

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

## Current Principal Place of Business:

12734 KENWOOD LN  
STE 49  
FORT MYERS, FL 33907

## New Principal Place of Business:

## Current Mailing Address:

C/O TROPICAL ISLES MGMT  
12734 KENWOOD LN, STE 49  
FORT MYERS, FL 33907

## New Mailing Address:

FEI Number: 51-0503333

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUDLAND, MARK  
12734 KENWOOD LN.  
STE 49  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

BECKER & POLIAKOFF, P.A.  
14241 METROPOLIS AVE.  
STE. 100  
FORT MYERS, FL 33912 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: JENNIFER C. WORTHINGTON

04/08/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: MILLER, ANNNE  
Address: 16575 LAKE CIRCLE DRIVE, #1127  
City-St-Zip: FORT MYERS, FL 33908

Title: STD ( ) Delete  
Name: JACOBSON, JAKE  
Address: 427 CEDERHILL AVE  
City-St-Zip: WYCKOFF, NJ 07481

Title: PD ( ) Delete  
Name: HYDE, SKIP  
Address: 16575 LAKE CIRCLE DRIVE, #1114  
City-St-Zip: FORT MYERS, FL 33908

Title: ASM ( ) Delete  
Name: RUDLAND, MARK  
Address: 12734 KENWOOD LANE STE 49  
City-St-Zip: FORT MYERS, FL 33907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HYDE, SKIP  
Address: 16575 LAKE CIRCLE DRIVE, #1114  
City-St-Zip: FT. MYERS, FL 33908

Title: VP (X) Change ( ) Addition  
Name: MCLEAN, BARBARA  
Address: 16575 LAKE CIRCLE DR., #1149  
City-St-Zip: FT. MYERS, FL 33908

Title: ST (X) Change ( ) Addition  
Name: JACOBSEN, JAKE  
Address: 16575 LAKE CIRCLE DRIVE, #1148  
City-St-Zip: FT. MYERS, FL 33908

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: JENNIFER C. WORTHINGTON

CAM

04/08/2009

Electronic Signature of Signing Officer or Director

Date