

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003878

FILED
Mar 26, 2009
Secretary of State

Entity Name: THE PRESERVE AT HERON LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

LIGHTHOUSE PROPERTY MGMT.
16 CHURCH ST
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

LIGHTHOUSE PROPERTY MGMT.
16 CHURCH ST
OSPREY, FL 34229

New Mailing Address:

FEI Number: 20-2424370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIGHTHOUSE PROPERTY MANAGEMENT, INC
LIGHTHOUSE PROPERTY MGMT.
16 CHURCH ST
OSPREY, FL 34229 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: PTD () Delete
Name: FETIGAN, IAN
Address: 7552 CONSEREVATION CT.
City-St-Zip: SARASOTA, FL 34241

Title: VD () Delete
Name: SNYDER, STEVE
Address: 7520 PRESERVATION DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: TD () Delete
Name: DRIMMER, JEFFREY
Address: 7590 PRESERVATION DR
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FETIGAN, IAN
Address: 7552 CONSEREVATION CT.
City-St-Zip: SARASOTA, FL 34241

Title: VP (X) Change () Addition
Name: SNYDER, STEVE
Address: 7520 PRESERVATION DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: TR (X) Change () Addition
Name: DRIMMER, JEFFREY
Address: 7590 PRESERVATION DR
City-St-Zip: SARASOTA, FL 34241

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: CONNIE SALUTER

MGR

03/26/2009

Electronic Signature of Signing Officer or Director

Date