
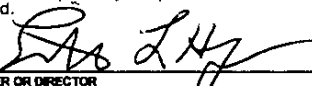


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000001037 1. Entity Name THE HERON VILLAGES OF CEDAR CREEK CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business 3899 JUDITH AVENUE MERRITT ISLAND, FL 32953	Mailing Address 3899 JUDITH AVENUE MERRITT ISLAND, FL 32953	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MINOT, MICHAEL S ESQ 319 RIVEREDGE BLVD. STE. #18 COCOA, FL 32922		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, RONNIE 3978 JUDITH AVENUE MERRITT ISLAND, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PECORARO, ALPHONSE 3969 JUDITH AVENUE MERRITT ISLAND, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAFAVE, PRISCILLA 3919 JUDITH AVENUE MERRITT ISLAND, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEDBERG, ERNEST L 3959 JUDITH AVENUE MERRITT ISLAND, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARTER, CHARLES L 4068 JUDITH AVENUE MERRITT ISLAND, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>ERNEST L. HEDBERG</u> 		1-25-07 321-684-4095 Date Daytime Phone #



01252007 No Chg-NP CR2E037 (4/06)

4. FEI Number 54-2128323	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/31/07-80011-018 61.25

**DO NOT WRITE
IN THIS SPACE**