

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008854

**FILED**  
**Mar 30, 2012**  
**Secretary of State**

**Entity Name:** HERONS COVE ASSOCIATION, INC.

**Current Principal Place of Business:**

409 E COLLEGE AVE  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1058  
RUSKIN, FL 33575

**New Mailing Address:**

**FEI Number:** 20-4381534

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, LOU E  
409 E COLLEGE AVE  
RUSKIN, FL 33570 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:** DP  
**Name:** LOMBINO, FRANK  
**Address:** 9738 ROLLING CIRCLE  
**City-St-Zip:** SAN ANTONIO, FL 33576

**Title:** VP  
**Name:** HOWERTON, JAMES  
**Address:** 29606 TEE SHOT DRIVE  
**City-St-Zip:** SAN ANTONIO, FL 33576

**Title:** DS  
**Name:** FRANCISCO, RICHARD  
**Address:** 9449 ROLLING CIRCLE  
**City-St-Zip:** SAN ANTONIO, FL 33576

**Title:** DT  
**Name:** BUFF, MARINA  
**Address:** 9723 ROLLING CIRCLE  
**City-St-Zip:** SAN ANTONIO, FL 33576

**Title:** D  
**Name:** SHRADER, NANCY  
**Address:** 9333 ROLLING CIRCLE  
**City-St-Zip:** SAN ANTONIO, FL 33576

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:** LOU ELLEN WILSON

AGT

03/30/2012

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

\_\_\_\_\_  
Date