

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012792

FILED
Jul 08, 2009
Secretary of State

Entity Name: HERITAGE BAY UMBRELLA ASSOCIATION, INC.

Current Principal Place of Business:

110481 BEN C PRATT/6 MILE CYPRESS PARKWAY
FORT MYERS, FL 33966 US

New Principal Place of Business:

Current Mailing Address:

10481 BEN C PRATT/6 MILE CYPRESS PARKWAY
FORT MYERS, FL 33966 US

New Mailing Address:

FEI Number: 20-4772540 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
FORT MYERS, FL 33901 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: D () Delete
Name: LISTON, DAVID L
Address: 5801 PELICAN BAY BLVD. #600
City-St-Zip: NAPLES, FL 34108 US

Title: D () Delete
Name: ERON, CHAD
Address: 5801 PELICAN BAY BLVD. #600
City-St-Zip: NAPLES, FL 34108 US

Title: D () Delete
Name: BEITER, DAN
Address: 5801 PELICAN BAY BLVD. #600
City-St-Zip: NAPLES, FL 34108 US

Title: D () Delete
Name: SMITH, RUSSELL
Address: 10481 BEN C PRATT/6 MILE CYPRESS PARKWAY
City-St-Zip: FORT MYERS, FL 33966 US

Title: D (X) Delete
Name: BERGER, DAYNA
Address: 5801 PELICAN BAY BLVD. #600
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BORKENHAGEN, KEVIN
Address: 10625 WILLOW OAK COURT
City-St-Zip: WELLINGTON, FL 33414 US

Title: D (X) Change () Addition
Name: NUNN, WILHELM
Address: 3020 S. FALKENBURG ROAD
City-St-Zip: RIVERVIEW, FL 34108 US

Title: D (X) Change () Addition
Name: WYRICK, JASON
Address: 10801 CORKSCREW ROAD - SUITE 421
City-St-Zip: ESTERO, FL 33928 US

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

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: KEVIN BORKENHAGEN

D

07/08/2009

Electronic Signature of Signing Officer or Director

Date