2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05918

FILED Apr 23, 2007 Secretary of State

Entity Name: HERON WALK OWNERS ASSOCIATION, INC.

	rincipal Place of Business:	New Principal Place of Business:	
215 GRAN SUITE 200 MIRAMAR			
Current N	lailing Address:	New Mailing Address:	
215 GRAN SUITE 200 MIRAMAR			
FEI Number	: 59-2493303 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired	()
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
215 GRAN SUITE 200 MIRAMAR The above) R BEACH, FL 32550 US	rpose of changing its registered office or registered agent, or	r both,
SIGNATU		t Data	
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS:		Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR:	
			ECTOR
Title:	DP () Delete SMITH, LORRAINE	Title: () Change () Addition	
Address:	442 OSBORN AVE BRICK, NJ 08723 US	Name: Address: City-St-Zip:	
Address: City-St-Zip: Title: Name: Address:	442 OSBORN AVE	Address:	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip:	442 OSBORN AVE BRICK, NJ 08723 US D () Delete HALE, DAVID 7155 HAVERSHIRE COVE	Address: City-St-Zip: Title: () Change () Addition Name: Address:	
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	442 OSBORN AVE BRICK, NJ 08723 US D () Delete HALE, DAVID 7155 HAVERSHIRE COVE GERMANTOWN, TN 38138 US DST () Delete WIRTH, WILLIAM J 5309 EAST COVE	Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: DST (X) Change () Addition Name: HAUCK, DONNA Address: 2841 LANDING DR	

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNA HAUCK SEC 04/23/2007