# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 02, 2007**
**Secretary of State**

DOCUMENT# N06000004990

**Entity Name:** VERANDA I AT HERITAGE BAY ASSOCIATION, INC.

**Current Principal Place of Business:**

10481 SIX MILE CYPRESS PKWY
FT MYERS, FL 33912

**New Principal Place of Business:**

11691 GATEWAY BLVD.
203
FT MYERS, FL 33913

**Current Mailing Address:**

10481 SIX MILE CYPRESS PKWY
FT MYERS, FL 33912

**New Mailing Address:**

11691 GATEWAY BLVD.
203
FT MYERS, FL 33913

**FEI Number: 20-5181862** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**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 ST
FT MYERS, FL 33901 US

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

S & S GOLF MANAGEMENT
11691 GATEWAY BLVD.
203
FT MYERS, FL 33913 US

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: REBECCA SARVER 05/02/2007
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: DEVEREAUX, MATT
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete
Name: HAGEN, JOHN
Address: 10481 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete
Name: DEBITETTO, JOHN
Address: 10471 SIX MILE CYPRESS PKWY
City-St-Zip: FT MYERS, FL 33912

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: DUMFORD, JOHN
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FT MYERS, FL 33913

Title: DVP (X) Change ( ) Addition
Name: ALBARELLI, MICHAEL
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FT MYERS, FL 33913

Title: DST (X) Change ( ) Addition
Name: WATSON, DIANNE
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FT MYERS, FL 33913

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: JOHN DUMFORD DP 05/02/2007
Electronic Signature of Signing Officer or Director Date