


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

**FILED**  
**Mar 26, 2007 8:00 am**  
**Secretary of State**

03-26-2007 90074 047 \*\*\*\*61.25

**DOCUMENT # N06000008266**

1. Entity Name  
 TERRACE II AT HERITAGE BAY ASSOCIATION, INC.



Principal Place of Business  
 10481 SIX MILE CYPRESS PKWY  
 FORT MYERS, FL 33912

Mailing Address  
 10481 SIX MILE CYPRESS PKWY  
 FORT MYERS, FL 33912

40041754



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

01162007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
 20-5355462

Applied For  
 Not Applicable

City & State

Zip Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

SHIELDS, CHRISTOPHER J ESQ.  
 1833 HENDRY STREET  
 FORT MYERS, FL 33901

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE D  Delete  
 NAME DEVEREAUX, MATT  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE  Change  Addition  
 NAME PD THRON, DANIEL  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE D  Delete  
 NAME HAGEN, JOHN  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE  Change  Addition  
 NAME VD SORENSEN, ANDY  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE D  Delete  
 NAME DEBITETTO, JOHN  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33912

TITLE  Change  Addition  
 NAME STD DISTEPHANO, PAUL  
 STREET ADDRESS 10481 SIX MILE CYPRESS PKWY  
 CITY-ST-ZIP FORT MYERS, FL 33966

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

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: Daniel Thron Daniel Thron 2/9/07 239-278-1177  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #