

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006912

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** VISTA AT HERITAGE BAY COMMONS ASSOCIATION, INC.

## Current Principal Place of Business:

10481 BEN C. PRATT/6 MILE CYPRESS PARKWAY  
FT MYERS, FL 33966

## New Principal Place of Business:

11691 GATEWAY BOULEVARD  
SUITE 203  
FT MYERS, FL 33913

## Current Mailing Address:

10481 BEN C. PRATT/6 MILE CYPRESS PARKWAY  
FT MYERS, FL 33966

## New Mailing Address:

11691 GATEWAY BOULEVARD  
SUITE 203  
FT MYERS, FL 33913

FEI Number: 26-0550895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J  
1833 HENDRY STREET  
FT MYERS, FL 33901 US

## Name and Address of New Registered Agent:

VISION MANAGEMENT  
11691 GATEWAY BOULEVARD  
SUITE 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

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BURDETT, ANTHONY J  
Address: 10481 BEN C. PRATT/6 MILE CYPRESS PARKWAY  
City-St-Zip: FT MYERS, FL 33966

Title: VPD ( ) Delete  
Name: MCMURRAY, DARIN  
Address: 10481 BEN C. PRATT/6 MILE CYPRESS PARKWAY  
City-St-Zip: FT MYERS, FL 33966

Title: STD ( ) Delete  
Name: BILLUPS, JOHN  
Address: 10481 BEN C. PRATT/6 MILE CYPRESS PARKWAY  
City-St-Zip: FT MYERS, FL 33966

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ANTHONY BURDETT

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date