2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# N08000004727

Entity Name: HERITAGE RUN TOWNHOME ASSOCIATION, INC.

Current Principal Place of Business:

5323 MILLENIA LAKES BLVD SUITE 121
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

5323 MILLENIA LAKES BLVD SUITE 121
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 61-1545466 **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:

ALBRECHT, SHARON
5323 MILLENIA LAKES BLVD SUITE 121
ORLANDO, FL 32839 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: DP ( ) Delete
Name: HANAHOE, RICHARD
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

Title: DV ( ) Delete
Name: SUMMERALL, SPARKMAN
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

Title: DVT ( ) Delete
Name: ALBRECHT, SHARON
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

Title: D ( ) Delete
Name: ROBERTS, RON
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

Title: DS ( ) Delete
Name: ERVIN, CARLY
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: RON, ROBERTS
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

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

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

Title: D (X) Change ( ) Addition
Name: CLEMENTS, ROB
Address: 5323 MILLENIA LAKES BLVD SUITE 121
City-St-Zip: ORLANDO, FL 32839

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: ROB CLEMENTS D 06/23/2009

Electronic Signature of Signing Officer or Director — Date