

Attachment

Vero Bay Homeowners Assoc, Inc.

700 Simini Cay Circle

Vero Beach, Fl. 32966-7197 647116

Doc. # N08573

April 27, 2001

Dept. of State

Div. of Corporations

Uniform Business Rpt. Filings

P. O. Box 1500

Tallahassee, Fl. 32302-1500

Gentlemen:

According to the 2001 form, it appears the Board of Directors were not updated as per our changes (see copy attached).

Thank you for your attention to this matter.

Sincerely,
Sarah M. Doney
Secy. / Treasurer

DOCUMENT # N08573

1. Entity Name

HERON CAY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

700 BIMINI CAY CIR
VERO BEACH FL 32966

Mailing Address

700 BIMINI CAY CIR
VERO BEACH FL 32966-7197

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2501810

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RIPP, GWENDOLYN G
99 DARBY CAY
VERO BCH FL 32966

7. Name and Address of New Registered Agent

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.

SIGNATURE: *Gwendolyn G Ripp* GWENDOLYN G RIPP, PRESIDENT 4-5-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

CK#
1019

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUNTHER, HENRY 3541 BIMINI CAY CIR VERO BEACH FL 32966 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/ JAMES KELLEHER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 513 VENUE COURT VERO BEACH, FL. 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RIPP, GWEN 99 DARBY CAY CIRCLE VERO BCH FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAC NAMEE, STEPHEN 428 BIMINI CAY CIRCLE VERO BEACH FL 32966 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/ GRACE SHOOK <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 284 MORRISTOWN CAY VERO BEACH, FL. 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARMINTROUT, DON 427 BIMINI CAY CIR VERO BEACH FL 32966 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/ EDWIN, CAMERON. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 462 BIMINI CAY CIRCLE VERO BEACH, FL. 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERGUSON, EUGENE 464 BIMINI CAY CIRCLE VERO BCH FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/ CHARLES NEUMAN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 234 HAWKSBILL CAY VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BELL, SHARON 539 STANLEY'S CAY VERO BEACH FL 32966 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.T./ SARAH DONEY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 55 DARBY CAY VERO BEACH, FL. 32966

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Sarah Doney* SARAH DONEY 4/5/00 561-569-7062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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