

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10897

FILED
Mar 31, 2009
Secretary of State

Entity Name: HEATHERWOOD OF BOCA RATON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT
3082 JOG ROAD
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

C/O PHOENIX MANAGEMENT
3082 JOG ROAD
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 59-2682855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHOENIX MANAGEMENT
3082 JOG ROAD
LAKE WORTH, FL 33467 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: SD () Delete
Name: KYLE, JOHN
Address: PO BOX 369
City-St-Zip: YARMOUTH, ME 04096 US

Title: D () Delete
Name: HOFFER, ERIC
Address: 5079 HEATHERWOOD LANE #3
City-St-Zip: BOCA RATON, FL 33486

Title: T () Delete
Name: SCHMIDT, TOM
Address: 5064 HEATHER HILL LANE #4
City-St-Zip: BOCA RATON, FL 33432

Title: P () Delete
Name: WALLACE, PAUL
Address: 301 W. CAMINO GARDENS BLVD. #200
City-St-Zip: BOCA RATON, FL 33432

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:

Title: P (X) Change () Addition
Name: WALLACE, PAUL
Address: 5063 HEATHERHILL LANE #1
City-St-Zip: BOCA RATON, FL 33486

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: PAUL WALLACE

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date