

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13253

FILED
Apr 27, 2009
Secretary of State

Entity Name: HERITAGE BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1307 43RD AVE. DR. W.
PALMETTO, FL 34221

New Principal Place of Business:

1101 9TH AVE WEST
BRADENTON, FL 34205

Current Mailing Address:

1307 43RD AVE. DR. W.
PALMETTO, FL 34221

New Mailing Address:

1101 9TH AVE WEST
BRADENTON, FL 34205

FEI Number: 59-2628029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABANILLAS, DENISE
4334 15TH WAY
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

CABANILLAS, DENISE
1101 9TH AVE WEST
BRADENTON, FL 34205 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:

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FITZPATRICK, MARK
Address: 4315 15TH WAY
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: SIROKY, BOB
Address: 1505 43RD AVE DR W
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: O'BANNON, BRENDA
Address: 1412-43RD AVE DR W
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: TERRY, LINDA
Address: 1528-43RD AVE DR W
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FITZPATRICK, MARK
Address: 4315 15TH WAY
City-St-Zip: PALMETTO, FL 34221

Title: VP (X) Change () Addition
Name: SIROKY, BOB
Address: 1505 43RD AVE DR W
City-St-Zip: PALMETTO, FL 34221

Title: D (X) Change () Addition
Name: CABANILLAS, DENISE
Address: 1101 9TH AVE WEST
City-St-Zip: BRADENTON, FL 34205

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: DENISE CABANILLAS

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date