

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90100 022 ****61.25

80077576

DO NOT WRITE IN THIS SPACE

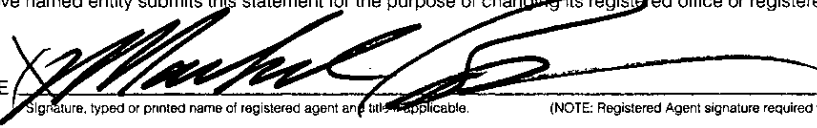
DOCUMENT # N37192
1. Entity Name
 THE HERON COACH HOUSES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 16531 Heron Coach Way
 Fort Myers, FL 33908
Mailing Address

2. Principal Place of Business
 Suite, Apt. #, etc.
3. Mailing Address
 12650 Whitehall Dr
 Suite, Apt. #, etc.
City & State Fort Myers, FL
City & State Fort Myers, FL
4. FEI Number 65-0128710
Applied For
 Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
Zip 33907 **Country** Lee

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent
Name Mark R. Benson
Street Address (P.O. Box Number is Not Acceptable) 12650 Whitehall Dr.
City Fort Myers **FL** **Zip Code** 33907

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  **DATE** 2/16/00
Signature, typed or printed name of registered agent and title, applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

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	
TITLE <input type="checkbox"/> Delete	PD Foultz, James 16540 Heron Coach Way #408 Fort Myers, FL 33908
TITLE <input type="checkbox"/> Delete	VD Jones, Patrick 16550 Heron Coach Way #702 Fort Myers, FL 33908
TITLE <input type="checkbox"/> Delete	SD Hornell, Bud 16550 Heron Coach Way #205 Fort Myers, FL 33908
TITLE <input type="checkbox"/> Delete	TD Newman, Norman 16561 Heron Coach Way #105 Fort Myers, FL 33908
TITLE <input type="checkbox"/> Delete	D Stewart, James 16561 Heron Coach Way #108 Fort Myers, FL 33908
TITLE <input type="checkbox"/> Delete	D Bennett, Kenneth 16551 Heron Coach Way #307 Fort Myers, FL 33908

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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:  **DATE** 2-5-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (9/99)