

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47501

FILED
Apr 20, 2005
Secretary of State

Entity Name: HERON BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

609 HERON BAY DR
ORLANDO, FL 328255920 US

New Principal Place of Business:

Current Mailing Address:

609 HERON BAY DR
ORLANDO, FL 328255920 US

New Mailing Address:

FEI Number: 59-3111688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLAPE, RALPH E
609 HERON BAY DR
ORLANDO, FL 328255920 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: PD () Delete
Name: KELLER, ALESIA
Address: 652 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255920 US

Title: VD () Delete
Name: TATLONGHARI, TERESA
Address: 648 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255920 US

Title: TD () Delete
Name: ROLAPE, RALPH E
Address: 609 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255920 US

Title: SD () Delete
Name: RAYMOND, KRIS
Address: 616 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255920 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KELLER, ALESIA
Address: 652 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255921 US

Title: VD (X) Change () Addition
Name: TATLONGHARI, TERESA
Address: 648 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255921 US

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

Title: D (X) Change () Addition
Name: RAYMOND, KRIS
Address: 616 HERON BAY DR
City-St-Zip: ORLANDO, FL 328255919 US

Title: SD () Change (X) Addition
Name: RAHAIM, CINDY
Address: 11212 GREEN HERON COURT
City-St-Zip: ORLANDO, FL 328255923 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RALPH E ROLAPE

TD

04/20/2005

Electronic Signature of Signing Officer or Director

Date