

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002604

FILED  
Jan 15, 2009  
Secretary of State

**Entity Name:** LAKE HERON HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

21361 LAKE FLOYD DRIVE  
LUTZ, FL 33549 US

**New Principal Place of Business:**

**Current Mailing Address:**

7001 TEMPLE TERR HWY  
TEMPLE TERRACE, FL 33637 US

**New Mailing Address:**

**FEI Number:** 59-3128867

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANTONIO DMARTE 111  
6621 LAND O LAKES BLVD.  
LAND O LAKES, FL 34639 US

**Name and Address of New Registered Agent:**

ANTONIO DUARTE 111  
6621 LAND O LAKES BLVD.  
LAND O LAKES, FL 34639 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: ANTONIO DUARTE

01/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: LISK, MARSHA  
Address: 1620 LAKE HERON DR  
City-St-Zip: LUTZ, FL 33549

Title: VP ( ) Delete  
Name: CORSO, MICHELE  
Address: 1620 LAKE HERON DR  
City-St-Zip: LUTZ, FL 33549

Title: TD ( ) Delete  
Name: KAWCZYNSKI, BARBARA  
Address: 1551 LAKE HEABRO DR.  
City-St-Zip: LUTZ, FL 33549

Title: PD ( ) Delete  
Name: SUMBURY, ROBERT  
Address: 21543 WOODSTORK LANE  
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete  
Name: DEUAL, ELAINE  
Address: 1725 LAKE HERON DR  
City-St-Zip: LUTZ, FL 33549

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LISK, MARSHA  
Address: 1620 LAKE HERON DR  
City-St-Zip: LUTZ, FL 33549

Title: VPD (X) Change ( ) Addition  
Name: CORSO, MICHELE  
Address: 1620 LAKE HERON DR  
City-St-Zip: LUTZ, FL 33549

Title: TD (X) Change ( ) Addition  
Name: SAUS, MAX  
Address: 21426 SNOWY EGRET  
City-St-Zip: LUTZ, FL 33549

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

Title: SD (X) Change ( ) Addition  
Name: COE, DAN  
Address: 21349 AARON COURT  
City-St-Zip: LUTZ, FL 33549

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: DAN COE

S

01/15/2009

Electronic Signature of Signing Officer or Director

Date