2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N93000003813

Entity Name: HERON CAY PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3200 HERON COVE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2178
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 59-3244693 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUCE, KARL
3200 HERON COVE
WINTER HAVEN, FL 33884 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: DUCE, KARL
Address: 3200 HERON COVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete
Name: DUCE, KARL
Address: 3200 HERON COVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete
Name: DRUM, EVA
Address: 3314 EAGLES TRACE
City-St-Zip: WINTER HAVEN, FL 33884

Title: T ( ) Delete
Name: VAN RYSWYK, JENNIFER
Address: 3306 EAGLES TRACE
City-St-Zip: WINTER HAVEN, FL 33884

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: ( ) 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: JENNIFER M VANRYSWYK T 04/15/2009

Electronic Signature of Signing Officer or Director — Date