

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004580

FILED  
Jan 26, 2011  
Secretary of State

**Entity Name:** BLUE HERON HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

BLUE HERON HOME OWNERS ASSC.,INC.  
229-9 ST NORTH  
ST. PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

BLUE HERON HOME OWNERS ASSC.,INC.  
P.O. BOX 36  
TERRA CEIA, FL 34250 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

KENT, LEWIS  
299-9 ST. NORTH  
SAINT PETERSBURG, FL 33701 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: DP  
Name: KENT, LEWIS H  
Address: 288 BEACH DRIVE NE UNIT 5B  
City-St-Zip: ST5. PETERSBURG, FL 33701

Title: DT  
Name: KENT, RUTH D  
Address: 288 BEACH DRIVE NE UNIT 5B  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: VD  
Name: CHACHULA, JASON  
Address: P.O. BOX 298 ;50 ISLAND CT  
City-St-Zip: TERRA CEIA, FL 34250

Title: DS  
Name: HIGGINS, DIANA  
Address: POB 168; 30 ISLAND CT  
City-St-Zip: TERRA CEIA, FL 34250

Title: DAT  
Name: HICKS, DAWN  
Address: P.O.BOX 228 ; 31 ISLAND COURT  
City-St-Zip: TERRA CEIA, FL 34250

I hereby 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 all other like empowered.

SIGNATURE: LEWIS HALL KENT

PRES

01/26/2011

Electronic Signature of Signing Officer or Director

Date