

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002678

FILED
Apr 29, 2009
Secretary of State

Entity Name: HERITAGE PARK HOMEOWNERS ASSOCIATION OF PLANTATION, INC.

Current Principal Place of Business:

600 SW 4TH AVE
FT LAUDERDALE, FL 33315

New Principal Place of Business:

600 SW 4TH AVE
FT LAUDERDALE, FL 33315 US

Current Mailing Address:

600 SW 4TH AVE
FT LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 65-0717524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CTI COMPUTER TRAINING INSTITUTE, INC.
600 SW 4TH AVE
FT LAUDERDALE, FL 33315 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: D () Delete
Name: WALLACE, ANGELA J
Address: 5352 SW 11TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: CELELLO, JOSEPH
Address: 5332 SW 11TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: AYALA, JR, EMMANUEL
Address: 5283 SW 11TH ST
City-St-Zip: FORT LAUDERDALE, FL 33317

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:

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: ANGELA J WALLACE

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date