2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000747

Apr 20, 2004 Secretary of State

FILED

Entity Name: HERITAGE PLACE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 W. SR 434 STE 5000

LONGWOOD, FL 327795001 US

New Mailing Address: Current Mailing Address:

2180 W. SR 434 STE 5000

LONGWOOD, FL 327795001 US

FEI Number: 59-3382798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HART, JAMES W JR SENTRY MANAGEMENT INC. 2180 W. SR 434 STE 5000 LONGWOOD, FL 327795001 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete SHORTEN, JOSEPH P Name: 3113 AMTIRTAM CREEK CT. Address: City-St-Zip: ORLANDO, FL 32837

Title: STD () Delete Name: HENSLEY, BILL

Address: 3108 ANTIETAM CREEK CT City-St-Zip: ORLANDO, FL 32837

Title: () Delete NEVAREZ, MARIA Name:

12612 GETTYSBURG CIR Address: City-St-Zip: ORLANDO, FL 32837

(X) Change () Addition

HENSLEY, WILLIAM Name: Address: 3108 AMTIRTAM CREEK CT. City-St-Zip: ORLANDO, FL 32837

(X) Change () Addition Title:

Name: MASON, ROBERT Address: 12816 GETTYSBURG CIR City-St-Zip: ORLANDO, FL 32837

Title: STD (X) Change () Addition

Name: NORIEGA, NANCY Address: 3114 HERITAGE PL City-St-Zip: ORLANDO, FL 32837

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: WILLIAM HENSLEY PD 04/20/2004