

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000368

FILED
Apr 09, 2009
Secretary of State

Entity Name: HERITAGE OAKS GOLF VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

ARGUS PROP MGMT INC
2477 STICKNEY POINT RD 118A
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY PT. RD., SUITE 118-A
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 65-0728486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSS, DARLENE
2477 STICKARY PT. RD. #118A
SARASOTA, FL 34231 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: P () Delete
Name: MERTZ, CHUCK
Address: 4491 SOMMERSET DR
City-St-Zip: SARASOTA, FL 34238

Title: D (X) Delete
Name: OFAHERTY, JACK D
Address: 4403 CHASE OAKS DR
City-St-Zip: SARASOTA, FL 34241

Title: VP () Delete
Name: BRUNS, JERRY
Address: 4390 CHASE OAKS DR.
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: GALLETTE, RICHARD
Address: 4529 LEGACY CT
City-St-Zip: SARASOTA, FL 34241

Title: AS () Delete
Name: CROSS, DARLENE
Address: 2477 STICKNEY POINT RD 118A
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: FLORSHEIM, AIDA
Address: 4439 CHASE OAKS DR
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GALLETTE, RICHARD
Address: 4529 LEGACY COURT
City-St-Zip: SARASOTA, FL 34238

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

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

Title: T (X) Change () Addition
Name: WALKER, WAYNE
Address: 4617 SAMOSET DRIVE
City-St-Zip: SARASOTA, FL 34241

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: DARLENE CROSS

AS

04/09/2009

Electronic Signature of Signing Officer or Director

Date