

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90205 006 ****61.25

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1. Entity Name
HERON GLEN AT PELICAN LANDING HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
C/O PEGASUS PROPERTY MGMT.
17595 S. TAMiami, #100
FORT MYERS, FL 33908

Mailing Address
C/O PEGASUS PROPERTY MGMT.
17595 S. TAMiami, #100
FORT MYERS, FL 33908

40001011

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04092007

Chg-NP

CR2E037 (12/06)

4. FEI Number
65-0825509

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARSDEN, GARY
C/O PEGASUS PROPERTY MGMT.
17595 S. TAMiami, #100
FORT MYERS, FL 33908

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WATSON, CLIFF
STREET ADDRESS 3537 HERON GLEN COURT
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME RUSSELL, HAROLD
STREET ADDRESS 3530 HERON GLEN COURT
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE SD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME RICKS, DAN
STREET ADDRESS 3529 HERON GLEN COURT
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition
NAME BLOOM, LAURENCE
STREET ADDRESS 3534 HERON GLEN COURT
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clifford G. Watson **CLIFFORD G. WATSON**, 4/17/07 (239) 948-9450
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #