

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005635

FILED
Apr 22, 2011
Secretary of State

Entity Name: HERITAGE GREENS SINGLE FAMILY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE #215
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE #215
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0789419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAELSON, HENRY
2109 MORNING SUN LANE
NAPLES, FL 34119 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
Name: SHELTON, JOHN
Address: 2261 HERITAGE GREENS DRIVE
City-St-Zip: NAPLES, FL 34119

Title: P
Name: MICHAELSON, HENRY
Address: 2109 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: T
Name: MYERS, BOB
Address: 2312 HERITAGE GREENS DRIVE
City-St-Zip: NAPLES, FL 34119

Title: S
Name: CHADWELL, ELLEN
Address: 2352 HERITAGE GREENS DRIVE
City-St-Zip: NAPLES, FL 34119

Title: VP
Name: DAUTRICH, WILLIAM
Address: 2058 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

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: HENRY MICHAELSON

P

04/22/2011

Electronic Signature of Signing Officer or Director

Date