

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005915

FILED
Apr 24, 2009
Secretary of State

Entity Name: CLUB HOMES AT HERITAGE GREENS COMMONS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MGMT
2685 HORSHOE DR. SOUTH STE. 215
NAPLES, FL 34104 US

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSEHOE DRIVE SOUTH STE 215
NAPLES, FL 34104 US

Current Mailing Address:

C/O INTEGRATED PROPERTY MGMT.
3435- 10TH ST. N. #201
NAPLES, FL 34103 US

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSEHOE DRIVE SOUTH STE 215
NAPLES, FL 34104 US

FEI Number: 59-3477409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBOEST, RICHARD
1415 HENDRY STREET
FORT MYERS, FL 33901 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: DP () Delete
Name: SHERWOOD, SUSAN
Address: 1798 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: DVD () Delete
Name: DARE, ROSE-MARIE
Address: 1648 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: DST () Delete
Name: GIESER, CHRISTINA
Address: 1947 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHERWOOD, SUSAN
Address: 1798 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: S (X) Change () Addition
Name: PARROTT, RITA
Address: 1608 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: VPT (X) Change () Addition
Name: GEISER, CHRISTINA
Address: 1947 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

Title: D () Change (X) Addition
Name: JORDAN, JOHN
Address: 1729 MORNING SUN LANE
City-St-Zip: NAPLES, FL 34119

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: SUSAN SHERWOOD

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date