2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 06, 2007 8:00 am Secretary of State DOCUMENT # N97000006267 04-06-2007 90041 011 ****61.25 THE HERON'S FOREST PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address PO BOX 30038 MANAGEMENT ASSOCIATES 220 W. GARDEN ST., STE. 303 PENSACOLA, FL 32503 PENSACOLA, FL 32503 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3494669 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILKES, CAROL Susan Moody 220 W. GARDEN STREET Street Address (P.O. Box Number is Not Acceptable) **SUITE 303** PENSACOLA, FL 32503 220 West Garden Street Suite 303 City Zip Code. Pensacola 32502 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. 3-15-07 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE D ☐ Delete TITLE ☐ Change ■ Addition NAME PAYNER, HUGH NAME STREET ADDRESS 9915 RAIL CIR STREET ADDRESS PENSACOLA, FL 32507 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE ☐ Change ☐ Addition NAME BARTKOWSKI, MIKE MAME STREET ADDRESS 10132 BITTER DR STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32507 CITY-ST-ZIP TITLE ☐ Delete ППΕ ☐ Change ☐ Addition RUHR, JAMES NAME NAME STREET ADDRESS 9761 JABIRU LANE STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32507 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition SORTINO, MIKE NAME NAME **GRACHLE COURT** STREET ADDRESS STREET ADDRESS PENSACOLA, FL 32507 CITY-ST-ZIP CITY-ST-ZIP TITLE 12 Oelete ☐ Change ☐ Addition NAME BARTH, TOM NAME STREET ADDRESS RAIL CIRCLE STREET ADDRESS CITY-ST-71P PENSACOLA, FL 32507 CITY-ST-ZIP TITLE ☐ Change ☐ Addition NAME NAME

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STREET ADDRESS

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^{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.