

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002458

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** HERON'S WATCH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

THE ASSOCIATION OFFICE  
7 TOWN CENTER LOOP C-16  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1247  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 59-3517652

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

IRWIN, JIM  
7 TOWN CENTER LOOP  
STE C16  
SANTA ROSA BEACH, FL 32459 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: STD  
Name: SMITH, HAROLD  
Address: 168 LAKE POINTE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VD  
Name: DAVENPORT, CATHERINE  
Address: 12320 MANSHIP LANE  
City-St-Zip: BOWIE, MD 20715

Title: PD  
Name: RUSH, MORRIS C  
Address: 148 ALLEN LAKESHORE DR  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D  
Name: PADGETTE, EDITH  
Address: 1762 JOHNSON ROAD  
City-St-Zip: ATLANTA, GA 30306

Title: D  
Name: SULLIVAN, WILLIAM T  
Address: 34 HERON'S WATCH WAY UNIT 3201  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: MORRIS C RUSH

P

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date