

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000002732

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** NIGHT HERON POINT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

404 INLET RD  
RUSKIN, FL 33575

**New Principal Place of Business:**

404 INLET RD  
RUSKIN, FL 33570

**Current Mailing Address:**

P.O. BOX 573  
RUSKIN, FL 33575

**New Mailing Address:**

**FEI Number:** 59-0934814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITING, WAYNE  
404 INLET RD  
RUSKIN, FL 33570 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: HECKEL, BARBARA  
Address: P.O. BOX 573  
City-St-Zip: RUSKIN, FL 33575

Title: D  
Name: WHITING, WAYNE  
Address: P.O. BOX 573  
City-St-Zip: RUSKIN, FL 33575

Title: D  
Name: WHITING, MARJORIE  
Address: P.O. BOX 573  
City-St-Zip: RUSKIN, FL 33575

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: BARBARA W. HECKEL

TRES

04/20/2010

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

\_\_\_\_\_  
Date