2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000006672

FILED Jun 13, 2007 Secretary of State

Entity Name: THE COLONY AT HERON BAY ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

953 UNIVERSITY DRIVE CORAL SPRINGS, FL 33071 541 SOUTH STATE ROAD 7, #12

MARGATE, FL 33068

Current Mailing Address:

New Mailing Address:

953 UNIVERSITY DRIVE CORAL SPRINGS, FL 33071 C/O ABSOLUTE PROPERTY MANAGEMENT

541 SOUTH STATE ROAD 7, #12

MARGATE, FL 33068

FEI Number: 65-0882624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WHITTLE, CHARLES ERIC 953 UNIVÉRSITY DRIVE CORAL SPRINGS, FL 33071

US

ABSOLUTE PROPERTY MANAGEMENT 541 SOUTH STATE ROAD 7, #12 MARGATE, FL 33068

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: ABSOLUTE PROPERTY MANAGEMENT

06/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete COHEN, STEVE Name:

7141 NW 126TH TERR Address:

City-St-Zip: PARKLAND, FL 33076

Title: VPD () Delete

SIMON, PERRY Name: Address: 7086 NW 127TH WY City-St-Zip: PARKLAND, FL 33076

Title: () Delete THOMPSON, CLIFFORD Name:

7189 NW 127 WAY Address: City-St-Zip: PARKLAND, FL 33076 (X) Change () Addition

Name: SODER, KEATS Address: 12790 NW 73 STREET City-St-Zip: PARKLAND, FL 33076

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

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: ABSOLUTE PROPERTY MANAGEMENT

PM

06/13/2007