## 2001 UNIFORM BUSINESS REPORT (UBR)

	02839						
WATERFORD ESTATES AT HERON BAY ASSOCIATION, INC.				FILED			
Principal Place of Business Mailing Address ,			- 01 APR 26 AM 8: 29				
SITY DR. SUITE 300	2825 UNIVERSITY DR. SUITE 300		 	SECRETARY OF STATE			
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Principal Place of Business     A. Mailing Address //							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
е	City & State		4. FEI Number	4. FEI Number 65-0918426 Applied For Not Applicable			
Country	Zip	Country	5. Certificate of	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current R	egistered Agent		7. Name and	Address of New Registered			
<b>a.</b>			Name				
SIMON, ERIC A 2825 UNIVERSITY DR, SUITE 300 CORAL SPRINGS FL 33065		Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
		City	FL Zip Code				
Signature, typed or printed name of registered agent are	d title if applicable. (NOTE:	Registered Agent signature requ	vired when reinstating)	DATE			
1100 110111			\$5.00 May Be Added to Fees Make Check Payable to Department of State				
OFFICERS AND DIRE	ECTORS	11.	ADDITIONS/CHA	NGES TO OFFICERS AND I	DIRECTORS IN	10	
1	· Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	-05/09/01	-01018(	023 I	
VD VOLLER, CYNDI 2825 UNIVERSITY DR, SUITE 300	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		4	☐ Change	Addition	
VSTD SIMON, ERIC A 2825 UNIVERSITY DR, SUITE 300	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		$\sim$	☐ Change	☐ Addition	
	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		M	Change	☐ Addition	
	☐ Delete	TITLE NAME STREET ADDRESS		700	☐ Change	Addition	
	FORD ESTATES AT HERON B. FORD ESTATES AND B. FORD ESTATES AND DIRECT STATES AND DIRECT SHELLEY, ROBERT 2825 UNIVERSITY DR, SUITE 300 CORAL SPRINGS FL 33065 VSTD SIMON, ERIC A	FORD ESTATES AT HERON BAY ASSOCIATION, IN the of Business	FORD ESTATES AT HERON BAY ASSOCIATION, INC.  The of Business	PROPRIES AT HERON BAY ASSOCIATION, INC.  Incomplete of Business  Mailing Address SITY DR. SUITE 300  2825 UNIVERSITY DR. SUITE 300  CORAL SPRINGS FL 33065  F. etc.  Suite, Apt. #, etc.  Country  July  Country  July  Country  5. Certificate of Street Address of Current Registered Agent  Name  RIC A  VERSITY DR, SUITE 300  PRINGS FL 33065  City  Inamed entity submits this statement for the purpose of changing its registered office or registered agent, or both  Superium, types or priced name of registered agent and tild if applicable.  FILE NOW: FEE IS \$61.25  Superium, types or priced name of registered agent and tild if applicable.  FILE NOW: FEE IS \$61.25  PD  SHELLEY, ROBERT  2825 UNIVERSITY DR, SUITE 300  CORAL SPRINGS FL 33065  UD  CORAL SPRINGS FL 33065  Delete  INE  MAILING Address  Mailing Address  Address  Notification  T. Name and  Name  Street Address (P.O. Box Number)  Street Address (P.O. Box Number)  FILE NOW: FEE IS \$61.25  FULLEY, ROBERT  2825 UNIVERSITY DR, SUITE 300  CORAL SPRINGS FL 33065  UD  Delete  INE  MAILING  SIRECT ADDRESS  CITY-ST- 2IP  Delete  INE  MAIL  SIRECT ADDRESS  CITY-ST- 2IP  Delete  MAIL  SIRECT ADDRESS  CITY-ST- 2IP  Delete  MAIL  SIRECT ADDRESS  CITY-ST- 2IP  Delete  MAIL  M	FILE DO OI APR 26 AM SECRETARY DF S TALLAHASSEE FLI  Water of Business  Mailing Address  Willing Address  CORAL SPRINGS FL 30065  CORAL SPRINGS FL 30065  A. PEL Number SF-0918426  Country  Zip Country  Zip Country  Street Address of Current Registered Agent  Refic.  Country  T. Name and Address of New Registered  Street Address (P.O. Box Number is Not Acceptable)  FILE NOW:	FORD ESTATES AT HERON BAY ASSOCIATION, INC.  FILE D  OI APR 26 AM 8: 29  SECRETARY OF STATE TALLAHASSEE FLORIDA  A FELLAHASSEE FLORIDA  Pace of Susiness  4, stoc.  Country  Zip  Country  Street Address of New Registered Agent  7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  FILE NOW: FEE IS \$61.25  FILE NOW: FEE IS \$61.25  PD  Secion Composing Financing  Trust Final Countrolion.  PD  SHELLEY, ROBERT  Secion Composing Financing  Trust Final Countrolion.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  SIERET ALORSS  OFFICERS AND DIRECTORS IN  SIERET ALORSS  OFFI-SI-P  NOME  SIERET ALORSS  OFFI-SI-P  NOME  SIERET ALORSS  OFFI-SI-P  NOME  SIERET ALORSS  OFFI-SI-P  OLIVE  OLIVE  Charge  Signific Alors Signific  Signific Alors Sign	

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.

SIGNATURE:

4/24/01 954-757-9300