

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003836

FILED  
Apr 09, 2009  
Secretary of State

**Entity Name:** HERON PARK VILLAS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

**FEI Number:** 59-3657545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIZZETTA & COMPANY, INC.  
5844 OLD PASCO ROAD  
SUITE 100  
WESLEY CHAPEL, FL 33544 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: P ( ) Delete  
Name: O'DONNELL, TIM  
Address: 5747 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: VP ( ) Delete  
Name: MCKEITH, WILLARD  
Address: 5707 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: ST ( ) Delete  
Name: TRINER, WILLIAM  
Address: 5711 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: D ( ) Delete  
Name: SCALICE, RONALD H  
Address: 5716 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: D (X) Delete  
Name: REECE, STEVE  
Address: 5843 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: REECE, STEVE  
Address: 5843 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: D (X) Change ( ) Addition  
Name: BUHR, MICHAEL  
Address: 5734 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

Title: D (X) Change ( ) Addition  
Name: SUITOR, SUSAN  
Address: 5814 HERONPARK PLACE  
City-St-Zip: LITHIA, FL 33547 US

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: TIM O'DONNELL

P

04/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date