P01000085899

(Re	equestor's Name)	1		
(Ac	ldress)			
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SECRETARY OF STATE

12-100m

COVER LETTER

TO:	TO: Amendment Section Division of Corporations					
SUBJ	SUBJECT: HERON PROPERTIES, INC.					
	(Name of Corpora	ition)				
DOCU	DOCUMENT NUMBER: P01000085899					
The en	enclosed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.				
Please	e return all correspondence concerning this matter to the	e following:				
	,					
	Derek Breen					
	(Name of Contact P	Person)				
	A H Gantt CPA & Associates Pa					
	(Firm/Compan	y)				
	3359 W Vine St # 104					
	(Address)					
	Kissimmee FL 34741					
(City/State and Zip Code)						
For fu	urther information concerning this matter, please call:					
Derek	k Breen at (407 931-2344 ext 103				
	(Name of Contact Person)	407 931-2344 ext 103 (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				
		Tallahassee, FL 32301				

STATEMENT OF GHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0302, on provisions of sections 607.0302, on provision organized to change its registered office or registered or regis	ed under the laws of the State of Flori	ida
1. The name of	the corporation: HERON PROPERTIES, IN	C	
2. The principal Auburndale	office address: 248 Lake Tennessee Drive FL 33823		
3. The mailing a	address (if different): 248 Lake Tennessee FL 33823	Drive	
4. Date of incor	poration/qualification: 03/30/2001	Document number: P010000858	99
	d street address of the current registered ager rtment of State:	nt and registered office on file with the	e
	Christopher R Venier		
	149 Shady Oak Loop		
	Davenport FL 33896	2) []	08 A
6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed):			
	A H Gantt CPA & Associates Pa	(건) 	
	3359 W Vine St # 104		1:26 STATE
	(P.O Box NOT acceptable) Kissimmee FL 34741		.,
	Nissimmee FL 34741		
The street address changed will	ess of its registered office and the street ad I be identical.	ldress of the business office of its reg	gistered agent,
Such change wauthorized by t	as authorized by resolution duly adopted be board, or the corporation has been notif	by its board of directors or by an officied in writing of the change.	cer so
(Signat	ure of an officer or disector)	Fern King, President (Printed or typed name and title)	
I further agree of my duties, ar document is be	t the appointment as registered agent and a to comply with the provisions of all statute nd I am familiar with and accept the oblige ing filed merely to reflect a change in the i s been notified in writing of this change.	agree to act in this capacity, es relative to the proper and complet ation of my position as registered ag registered office address, I hereby co	te performance vent. Or, if this onfirm that the
Duch bu	SW DEREK BREEN / P	03/31/2008 (Date)	<u> </u>
	ehalf of an entity:	(,	
	PA & Associates PA		
	Typed or Printed Name)		

* * * FILING FEE: \$35.00 * * *