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Secretary of State

02-20-1999 90101 044 ***150.00

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000032548

1. Corporation Name

STREET ADDRESS

BLUE HERON REALTY, INC.

	•						
Principal Place of Business Mailing Address						1 (Ellifall 110 ratti Brait GENL Batti antri anna treis mass ateri ander ent sant	
4100 CORPORATE SO 4100 CORPORATE SO							
STE 157 STE157				•			DO NOT WRITE IN THIS SPACE
NAPLES FL 34104 NAPLES FL 34104							3. Date Incorporated or Qualifed .
US US							04/27/1994
2 Dringing Di	ace of Business	22	Mailing Address				4, FEI Number Applied For
⊢ '	ace of Dustriess	— —	26				65-0487487 Not Applicable
Suite, Apt.	#. etc.	201	Suite, Apt. #, etc.				\$8.75 Additional
22		27	27			-	5. Certifcate of Status Desired Fee Required
City & State	9		City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country		Zip		untry		8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
	9. Name and Address of Curro	ent Regis	tered Agent		81	Name	10. Name and Address of New Registered Agent
DALS	SIN, WILLIAM T JR						
	CORPORATE SQ	87			82	Street Ac	Address (P.O. Box Number is Not Acceptable)
STE					83		
	ES FL 34104						
					84	City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	502 and 6	07 1508 Florida Statut	es, the a	bove	e-named co	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florid	ia. Such change was a	iuthonze	d by	tne corpora	oration's board of directors. I hereby accept the appointment as registered
-	m tamiliar with, and accept the oblig	galions oi,	Section 607.0303, Fig	niua ota	iuics.		
SIGNATURE	Signature, typed or printed name of registered a	gent and title i	if applicable. (NOTE	: Registere	d Agen	t signature req	equired when reinstating) DATE
12.	OFFICERS A			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P		DELETE	1.1 7	ITLE		☐ Change ☐ Addition
NAME	DALSIN, WILLIAM T. J			121	ME		
STREET ADDRESS	4100 CORPORATE SQ STE	157		1.3 8	TREE	ADDRESS	
CITY-ST-ZIP	NAPLES FL 34104		- DELETE	_	TY-S	T-ZIP	☐ Change ☐ Addition
TITLE				TILE	İ		
NAME					IAME		
STREET ADDRESS				- 1		ADDRESS	
CITY-ST-ZIP -			☐ DELETE		2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE			1	3.2 NAME			
NAME						ADDRESS	
STREET ADDRESS					CITY-S	1	
CITY-ST-ZIP			☐ DELETE	_	TILE		Change Addition
NAME				4.2	NAME	1	
STREET ADDRESS				4.3 5	TREET	ADDRESS	
CITY-ST-ZIP					CITY-ST		
TITLE	,			5.1 TITLE		Change Addition	
NAME				5.21	AMÉ		
STREET ADDRESS				5.3 5	TREET	ADDRESS	
CITY-ST-ZIP				5.4 0	CITY-S	r-zip	
TITLE			☐ DELETE	6.11	TILE		Change Addition
NAME				6.27	NAME		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP