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Apr 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000070489 (6)

1. Corporation Name  
HERON BAY, INC.



Principal Place of Business  
8300 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065

Mailing Address  
3300 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065-6309

3. Date Incorporated or Qualified 09/11/1995	3a. Date of Last Report 04/24/1990
4. FEI Number 65-0540040	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent	
GORDON, K. Y. 3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85	Zip Code

10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (no change) Kenneth Y. Gordon 4/15/97  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	DT
NAME	DISTEFANO, P L
STREET ADDRESS	3300 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	CP
NAME	RAMSEY, R. W
STREET ADDRESS	3300 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	VS
NAME	MCGOWAN, J. P
STREET ADDRESS	% 3300 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	V
NAME	GRAHAM, D. H
STREET ADDRESS	% 3300 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P/D
1.2 NAME	STREIB, LARRY W.
1.3 STREET ADDRESS	3300 University Drive
1.4 CITY-ST-ZIP	Coral Springs, FL 33065
2.1 TITLE	V/S/D
2.2 NAME	PASOLLI, SCOTT A.
2.3 STREET ADDRESS	3300 University Drive
2.4 CITY-ST-ZIP	Coral Springs, FL 33065
3.1 TITLE	V
3.2 NAME	DILLON, RONALD C.
3.3 STREET ADDRESS	3300 University Drive
3.4 CITY-ST-ZIP	Coral Springs, FL 33065
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE Ronald C. Dillon, Vice President 4/15/97

CR2E034 (9/96)