

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001634

**FILED**  
**Mar 29, 2018**  
**Secretary of State**  
**CC4642346543****Entity Name:** TERRACES AT HERITAGE ISLE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5505 N ATLANTIC AVE  
207  
COCOA BEACH, FL 32931**Current Mailing Address:**C/O KEYS PROPERTY MANAGEMENT  
5505 N ATLANTIC AVE #207  
COCOA BEACH, FL 32931**FEI Number:** 20-5778665**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KEYS PROPERTY MANAGEMENT ENTERPRISE, INC  
5505 N. ATLANTIC AVENUE  
SUITE 207  
COCOA BEACH, FL 32931 US*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

**Officer/Director Detail :**

Title VP  
Name RUTLEDGE, LARRY  
Address C/O KEYS PROPERTY MANAGEMENT  
5505 N ATLANTIC AVE #207  
City-State-Zip: COCOA BEACH FL 32931

Title PRESIDENT  
Name GARRETT, JUDITH E  
Address C/O KEYS PROPERTY MANAGEMENT  
5505 N ATLANTIC AVE #207  
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR  
Name MITCHELL, MIKE  
Address 5505 N ATLANTIC AVE  
207  
City-State-Zip: COCOA BEACH FL 32931

Title TREASURER  
Name BOGGI, HARRIETT  
Address 5505 N ATLANTIC AVE  
207  
City-State-Zip: COCOA BEACH FL 32931

Title SECRETARY  
Name NICHTERN, JOHN  
Address C/O KEYS PROPERTY MANAGEMENT  
5505 N ATLANTIC AVE #207  
City-State-Zip: COCOA BEACH FL 32931

Title MANAGER  
Name HEADRICK, SCOTT  
Address C/O KEYS PROPERTY MANAGEMENT  
5505 N ATLANTIC AVE #207  
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR  
Name KAPLAN, JEANNETTE  
Address 5505 N ATLANTIC AVE  
207  
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR  
Name RINGOOT, ED  
Address 5505 N ATLANTIC AVE  
207  
City-State-Zip: COCOA BEACH FL 32931

I hereby 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 all other like empowered.

**SIGNATURE:** SCOTT HEADRICK**MANAGER****03/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date