# 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: JANE REGAN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/13/2016

Date

### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9500000083

Entity Name: THE HERON COACH HOUSE VILLAS CONDOMINIUM ASSOCIATION, INC.

#### Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

#### **Current Mailing Address:**

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 US

#### FEI Number: 65-0523833

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

SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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	E: JAMES W HART JR			03/13/2016
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT, DIRECTOR	Title	SECRETARY, DIRECTOR	
Name	REGAN, JANE	Name	AUST, MAUREEN	
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000	
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779	
Title	TREASURER, DIRECTOR			
Name	MARCHAND, WHIT			
Address	2180 WEST SR 434 STE 5000			
City-State-Zip:	LONGWOOD FL 32779			

## Certificate of Status Desired: No

#### FILED Mar 13, 2016 Secretary of State CC8052939495