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May 10, 1999 8:00 am
Secretary of State

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

NONPROFIT
CORPORATION
ANNUAL REPORT
1999

DOCUMENT.# 749213

1. Corporation Name

HEATHER RIDGE WEST I ASSOCIATION, INC.

Principal Place of Business

3438 East Lake Rd. #22
Palm Harbor, FL 34685

Mailing Address

3438 East Lake Rd. #22
Palm Harbor, FL 34685

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/05/79

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-2987585

Applied For

Not Applicable

City & State

City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

William J. Nasser
2697B Sunset Point Rd.
Clearwater, FL 33759

81 Name James M. Nolan

82 Street Address (P.O. Box Number is Not Acceptable)
3438 East Lake Rd. #22

84 City Palm Harbor

FL

85 Zip Code
34685

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE PD
NAME Martha Wychor
STREET ADDRESS 1430 Heather Ridge
CITY-ST-ZIP Dunedin, FL 34698

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE VD
NAME Thomas Boyd
STREET ADDRESS 1430 Heather Ridge
CITY-ST-ZIP Dunedin, FL 34698

☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SD
NAME Dorothy Torstenson
STREET ADDRESS 1430 Heather Ridge
CITY-ST-ZIP Dunedin, FL 34698

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 617, 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.

SIGNATURE: Martha Wychor

4-29-99 727 785 8887