


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 22, 2005 8:00 am**  
**Secretary of State**

02-22-2005 90015 021 \*\*\*\*61.25

**DOCUMENT # 755973**  
 1. Entity Name  
**HERITAGE LAKE COMMUNITY ASSOCIATION, INC.**




Principal Place of Business  
**9151 HERITAGE LAKE BLVD  
 NEW PORT RICHEY, FL 34655**

Mailing Address  
**9151 HERITAGE LAKE BLVD  
 NEW PORT RICHEY, FL 34655**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country



02072005 Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-2055139**

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**EDER, NANCY E  
 9151 HERITAGE LAKE BLVD.  
 NEW PORT RICHEY, FL 34655**

7. Name and Address of New Registered Agent  
 Name **Norton, Richard**  
 Street Address (P.O. Box Number is Not Acceptable)  
**9151 Heritage Lake Blvd**  
 City **New Port Richey** FL Zip Code **34655**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Richard Norton  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is **\$61.25** Due by **May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PORTER, VIRGINIA 9151 HERITAGE LAKE BLVD NEW PORT RICHEY, FL 34655	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD moser, Howard 9151 Heritage Lake Blvd New Port Richey, FL 34655	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EDER, NANCY 9151 HERITAGE LAKE BLVD NEW PORT RICHEY, FL 34669	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Greene Leonora 9151 Heritage Lake Blvd New Port Richey, FL 34655	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HUFFMAN, ROBERT 9151 HERITAGE LAKE BLVD. NEW PORT RICHEY, FL 34655	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Lafreniere, Ruth 9151 Heritage Lake Blvd New Port Richey, FL 34655	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORTON, RICHARD 9151 HERITAGE LAKE BLVD NEW PORT RICHEY, FL 34669	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Norton, Richard 9151 Heritage Lake Blvd. New Port Richey, FL 34655	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD TOWER, REBECCA 9151 HERITAGE LAKE BLVD NEW PORT RICHEY, FL 34655	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Katzenstein, Al 9151 Heritage Lake Blvd. New Port Richey, FL 34655	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISHER, GEORGE 9151 HERITAGE LAKE BLVD NEW PORT RICHEY, FL 34669	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stevens Anne 9151 Heritage Lake Blvd. New Port Richey, FL 34655	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Norton Date 2-17-05  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #