

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 17, 2003 8:00 am**  
**Secretary of State**

02-17-2003 90255 006 \*\*\*\*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**

**10023940**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2055139**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARDEN, EDWARD  
9151 HERITAGE LAKE BLVD  
NEW PORT RICHEY FL 34655**

Name **Marjorie M. Sebring**

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 *Marjorie M. Sebring - Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

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

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD MARDEN, EDWARD 9151 HERITAGE LAKE BLVD NEW PORT RICHEY FL 34655</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD Porter, Virginia 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD REIF, EVA 9151 HERITAGE LAKE BLVD NEW PORT RICHEY FL 34655</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD Eder, Nancy 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD MOSER, HOWARD 9151 HERITAGE LAKE BLVD. NEW PORT RICHEY FL 34655</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD Huffman, Robert 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD KATZENSTEIN, AL 9151 HERITAGE LAKE BLVD NEW PORT RICHEY FL 34655</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Overcashier, Buddy 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD DATILO, RON 9151 HERITAGE LAKE BLVD NEW PORT RICHEY FL 34655</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AD Tower, Rebecca 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AD SEBRING, MARJORIE 9151 HERITAGE LAKE BLVD NEW PORT RICHEY FL 34655</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD Sebring, Marjorie M 9151 Heritage Lake Blvd New Port Richey, FL 34655</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E037 (10/02)

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: *Marjorie M. Sebring - Pres.*