

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

**FILED**

**Feb 05 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 762895 (1)  
1. Corporation Name  
**HERITAGE VILLAGE HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business: 1101 RANCH ROAD VERO BEACH FL 32966  
Mailing Address: 1101 RANCH ROAD VERO BEACH FL 32966

3. Date Incorporated or Qualified: 04/16/1982  
4. FEI Number: 59-2181689  
Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields.

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association? **NO MANDATORY ME** Yes  No   
8. This corporation owes or has a lien on real or tangible personal property tax due June 30. Yes  No

9. Name and Address of Current Registered Agent  
**CLARK, ROBERT C  
1936 41TH AVE.  
VERO BEACH FL 32966**

10. Name and Address of New Registered Agent (81-85) fields.

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE: P NAME: HILL, RALPH STREET ADDRESS: 1009 PEACE ST CITY-ST-ZIP: VERO BEACH FL	<input type="checkbox"/> DELETE
TITLE: V NAME: HUTCHINSON, RICHARD STREET ADDRESS: 430 UNION ST CITY-ST-ZIP: VERO BEACH FL	<input type="checkbox"/> DELETE
TITLE: D NAME: BATORY, GEORGE STREET ADDRESS: 178 CONGRESS ST CITY-ST-ZIP: VERO BEACH FL	<input checked="" type="checkbox"/> DELETE
TITLE: D NAME: HILL, RALPH STREET ADDRESS: 1009 PEACE ST CITY-ST-ZIP: VERO BEACH FL	<input type="checkbox"/> DELETE
TITLE: D NAME: DUDEK, LUCILLE STREET ADDRESS: 31 COLONY DR CITY-ST-ZIP: VERO BEACH FL	<input checked="" type="checkbox"/> DELETE
TITLE: T NAME: DETWEILER, KINSEY STREET ADDRESS: 420 UNION ST CITY-ST-ZIP: VERO BEACH FL	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: PRES. 1.2 NAME: HUTCHINSON, RICHARD 1.3 STREET ADDRESS: 318 HERITAGE BLVD. 1.4 CITY-ST-ZIP: VERO BEACH FL 32966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE: V. PRES. 2.2 NAME: BERGMANN, LOUIS 2.3 STREET ADDRESS: 200 LIBERTY ST. 2.4 CITY-ST-ZIP: VERO BEACH FL 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE: DIR. 3.2 NAME: CLARK, MARSHALL 3.3 STREET ADDRESS: 224 LIBERTY ST. 3.4 CITY-ST-ZIP: VERO BEACH, FL. 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE: SEC. 4.2 NAME: HILL, RALPH 4.3 STREET ADDRESS: 1009 PEACE ST 4.4 CITY-ST-ZIP: VERO BEACH FL. 32966	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE: DIR 5.2 NAME: CHAPUT LORRAINE 5.3 STREET ADDRESS: 365 HERITAGE BLVD. 5.4 CITY-ST-ZIP: VERO BEACH FL. 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE: TREAS. 6.2 NAME: DETWEILER, KINSEY 6.3 STREET ADDRESS: 420 UNION ST 6.4 CITY-ST-ZIP: VERO BEACH, FL. 32966	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Kinsey Detweiler* 1/2/98 (561) 569-8759

CR2E037 (10/97)