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

DOCUMENT # N02000001118

CLUBHOUSE HERITAGE PROPERTY OWNERS' ASSOCIATION. INC.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90410 013 ****61.25

<u> </u>					No wi						
Principal Pla	ace of Busines	SS	Mai	ling Address	<u>.</u>						
200 LAKE MORTON DR. LAKELAND FI. 33801				200 lake morton dr. Lakeland FL 33801							
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P			3. M	ailing Address	· · · · · · · · · · · · · · · · · · ·						
] P	.O. Box 237							
Suite, Apt. #, etc.			- 5	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
				City & State			4. FEI Number			Applied For	7
Zip Country				ghland City,			01-060577	<u>'0</u>		ot Applicabl	e
Ζίρ		Country		Zip	Country		5. Certificate of Stat	us Desired	\$8.75 A	dditional	٦
 -	6. Name	and Address of Currer	t Registe	33846	USA				Fee Requi	red	╝
		Audicas of Odifer	it neglate	red Agent	Name		7. Name and Addre	ss of New Register	ed Agent	<u> </u>	4
MARTIN	, ESNOW.	IR			Ĺ						-
200 LAKE MORTON DR.					Street Ad	ldress (l	P.O. Box Number is No	Acceptable)		-	٦
LAKELA	ND FL 3380	1									4
								-	. ,		╝
					City			F	Zip Co		- 1
8. The abov	e named entit ations of regist	y submits this statement	for the pur	pose of changing its r	egistered office or i	registere	ed agent, or both, in the	State of Florida. I a	m familiar with	, and accept	-
" A CONIGO	ations of regist	lered agent.									-
CICNATURE											
SIGNATURE		or printed name of registered ager	nt and title if an	policable (NOTE:	Registered Agent signature	a required					ł
				(1012)		e required	when reinstating)	DATI			
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	Make Che Florida Dep	eck Payable artment of		
10.		OFFICERS AND D	RECTORS	<u> </u>	11.		DDITIONS/CHANGES	TO OFFICERO AND	SUDEOTO DO		╛
TITLE	PD			☐ Delete	TITLE		DUTTONS/CHANGES	TO OFFICERS AND			۱,
NAME	LOFTIN, W				NAME				☐ Change	Addition	3
STREET ADDRESS 5151 SOUTH LAKELAND DR., STE.13					STREET ADDRESS						1
CITY-ST-ZIP	LAKELAND	FL 33813			CITY-ST-ZIP						18
TITLE	VD	00040 11/ 10		☐ Delete	TITLE			-	☐ Change	Addition	18
NAME CERTET ADDRESS	HUGERS,	OSCAR W JR.			NAME				_ ·		۱۲
STREET ADDRESS CITY-ST-ZIP	5431 U.S.				STREET ADDRESS						
	STD-	CITY FL 33846		_	CITY-ST-ZIP	 .	<u>-</u>				
NAME	ROGERS, (OUDTIE D		Defete	-FITLE				- Change -	- Addition	7
STREET ADDRESS	5431 U.S.				NAME STREET LODDESS						
CITY-ST-ZIP		CITY FL 33846		i	STREET ADDRESS CITY-ST-ZIP						
TITLE	11011210	OII 1 L 33040		☐ Delete						- <u>-</u>	1
NAME	•			Delete	TITLE NAME				Change	☐ Addition	
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STREET ADDRESS CITY-ST-ZIP					STREET ADDRESS						l
					CITY-ST-ZIP						ı

12. I hereby certify that the information supplied with this filling 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. Cartis D. Rogers, STD SIGNATURE:

1/8/03 1-863-646-5187