

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 21 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 745631 (2)

1. Corporation Name

HEATHER RIDGE VILLAS II ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O LAURA J. RAYBURN
1988 BAYSHORE BLVD.
DUNEDIN FL 34698

C/O LAURA J. RAYBURN
1988 BAYSHORE BLVD.
DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/18/1979
3a. Date of Last Report 04/12/1994

4. FEI Number 59-2987566
Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Seaboard Arbors Management Services, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1700 McMullen Booth Road, Suite C-3

City & State

City & State

23 Clearwater, FL

28 Clearwater, FL

Zip

Country

Zip

Country

24 34619

25 USA

29 34619

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAURA RAYBURN, P.A.
1988 BAYSHORE BLVD.
DUNEDIN FL 34698

81 Name Len Leighton
82 Street Address (P.O. Box Number is Not Acceptable)
C/O Seaboard Arbors Management Services, Inc.
83 1700 McMullen Booth Road, Suite C-3
84 City Clearwater, FL 85 Zip Code 34619

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed and printed name of registered agent and the filer, if applicable.

NOTE: Registered Agent signature required when registering.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME CLINCO, ANTHONY
STREET ADDRESS 1557 HEATHER RIDGE BLVD.
CITY - ST - ZIP DUNEDIN FL 34698

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE VD
NAME CROZIER, JAMES
STREET ADDRESS 1547 HEATHER RIDGE BLVD.
CITY - ST - ZIP DUNEDIN FL 34698

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME VPD
2.3 STREET ADDRESS Kidd, James
2.4 CITY - ST - ZIP 1491 Heather Ridge Blvd.
Dunedin, FL. 34698

TITLE STD
NAME GUY, VIRGINIA
STREET ADDRESS 1511 HEATHER RIDGE BLVD.
CITY - ST - ZIP DUNEDIN FL 34698

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Virginia Guy

Signature and typed name of signing officer or director

4/18/95

726-7474