

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728891

1. Entity Name

THE HEATHER PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90070 033 ****61.25

Principal Place of Business
9100 NAKOMA WAY
BROOKSVILLE FL 34613

Mailing Address
9100 NAKOMA WAY
BROOKSVILLE FL 34613-7503

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2033314

Applied For
Not Applicable

Zip Country Zip Country

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

BOWIE, BRUCE T.
9100 NAKOMA WAY
WEEKI WACHEE FL 34613

Name
Barbara J. Dohm
Street Address (P.O. Box Number is Not Acceptable)
9100 Nakoma Way
City
Weeki Wachee FL Zip Code
34613

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.

SIGNATURE
Barbara J. Dohm, PRESIDENT
Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

04/03/00

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LAPSHIP, A. PHILIP	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	BOWIE, BRUCE T.	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	WEEKI WACHEE FL 34613	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DOHM, BARBARA	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	BOWIE, BRUCE T	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HISLE, WILLIAM	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WEINAND, ROBERT	
STREET ADDRESS	9100 NAKOMA WAY	
CITY-ST-ZIP	BROOKSVILLE FL 34613	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barbara J. Dohm	
STREET ADDRESS	9100 Nakoma Way	
CITY-ST-ZIP	Weeki Wachee, FL 34613	
TITLE	V/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas B. Taylor	
STREET ADDRESS	9100 Nakoma Way	
CITY-ST-ZIP	Weeki Wachee, FL 34613	
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jerome D. Piotrowski	
STREET ADDRESS	9100 Nakoma Way	
CITY-ST-ZIP	Weeki Wachee, FL 34613	
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard Cummins	
STREET ADDRESS	9100 Nakoma Way	
CITY-ST-ZIP	Weeki Wachee, FL 34613	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lawrence Carsillo	
STREET ADDRESS	9100 Nakoma Way	
CITY-ST-ZIP	Weeki Wachee, FL 34613	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Philip Lapish* PHILIP LAPISH 443/00 596-5028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/93)