2002 UNIFORM BUSINESS REPORT (UBR) FILED May 21, 2002 8:00 am³ Secretary of State **DOCUMENT # N33936** 1. Entity Name HERITAGE PARK HOMEOWNERS ASSOCIATION, INC. 05-21-2002 91220 018 ****61 25 Principal Place of Business Mailing Address 5660 AMERICAN CIR. 5660 AMERICAN CIR. DELRAY BEACH FL 33484 **DELRAY BEACH FL 33484** 361633 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3036831 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) sweredośki. Doug 5661 AMERICAN CIRCLE DELRAY BEACH FL 33484 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Addition SWEREBOSKI, DOUG NAME SWEREDOSKI, DOUG NAME STREET ADDRESS STREET ADDRESS 5661 AMERICAN CIR CITY-ST-ZIP CITY-\$T-ZIP DELRAY BEACH FL 33484 Delete TITLE ☐ Change DONOGHUE, LEO NAME arena, mary NAME 641 AMERICAN CIR. STREET ADDRESS 5585 AMERICAN CIRCLE STREET ADDRESS CITY-ST-ZIP DELRAY Beach, FL 33484 CITY-ST-ZIP DELRAY BEACH FL 33484 TITI F TITLE ☐ Delete Change 🔀 ☐ Addition NAME STINGO: PHYLLIS STREET ADDRESS 5589 AMERICAN CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DELRAY BEACH FL 33484 Delete TITLE TITLE D Change Addition NAME PROODIAN, ANNETE NAME MANCEY - Delete STREET ADDRESS STREET ADDRESS 5592 AMERICAN CIRCLE CITY-ST-ZIP CITY-ST-ZIP <u>DELRAY BEACH FL 33484</u> TITLE ☐ Delete TITLE PAUL, ARMOND 5565 AMERICAN CIR Delray Bch, 7C 33484 NAME SCUILLI, FELIX NAME STREET ADDRESS STREET ADDRESS 5640 AMERICAN CIR CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33484 TITLE TITLE nith, CAROLYN POODIAN, ANNETTE NAME STREET ADDRESS STREET ADDRESS 5592 AMERICAN CIR CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33484 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. President SIGNATURE:

STATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR