

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002167

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** LAKESIDE VILLAGE OF HERITAGE SPRINGS, INC.

**Current Principal Place of Business:**

1131 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

1037 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

1131 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

1037 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655

**FEI Number:** 59-3610213

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WERTOVITCH, STEVEN  
1131 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655 US

**Name and Address of New Registered Agent:**

BABUREK, JAN  
1037 ASHBOURNE CIR  
NEW PORT RICHEY, FL 34655 US

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: JAN BABUREK

01/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DV  
Name: SCHUMER, JUDITH  
Address: 1013 ASHBOURNE CIR  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DS  
Name: DORNE, ED  
Address: 1033 ASHBOURNE CIR  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DT  
Name: BABUREK, JANET  
Address: 1037 ASHBOURNE CIR  
City-St-Zip: NEW PORT RICHEY, FL 34655

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAN BABUREK

DT

01/18/2012

Electronic Signature of Signing Officer or Director

Date