

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751008

**Entity Name:** HEATHER RIDGE VILLAS IV ASSOCIATION, INC.

**FILED**  
**Jan 11, 2021**  
**Secretary of State**  
**3288166660CC**

**Current Principal Place of Business:**

C/O PREMIER PROPERTIES OF PINELLAS, INC.  
1585 MAIN ST  
DUNEDIN, FL 34698

**Current Mailing Address:**

C/O PREMIER PROPERTIES OF PINELLAS, INC.  
P.O. BOX 1004  
DUNEDIN, FL 34697 US

**FEI Number: 59-2987569**

**Certificate of Status Desired: No**

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

WIBERG, MARIE S  
1585 MAIN ST.  
DUNEDIN, FL 34698 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HARRIS, SYLVIA  
Address        PO BOX 1004  
City-State-Zip: DUNEDIN FL 34697

Title            TREASURER, SECRETARY  
Name            NARDELLO, LUANN H  
Address        PO BOX 1004  
City-State-Zip: DUNEDIN FL 34697

Title            DIRECTOR  
Name            HALL , JOYCE  
Address        PO BOX 1004  
City-State-Zip: DUNEDIN FL 34697

Title            VP  
Name            BERKELAND, GERALD  
Address        PO BOX 1004  
City-State-Zip: DUNEDIN FL 34697

Title            DIRECTOR  
Name            LAUTEN, RODNEY  
Address        PO BOX 1004  
City-State-Zip: DUNEDIN FL 34697

*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: SYLVIA HARRIS**

**PRESIDENT**

**01/11/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date