

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

DOCUMENT# 755973

**Entity Name:** HERITAGE LAKE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

9151 HERITAGE LAKE BLVD  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

9151 HERITAGE LAKE BLVD  
NEW PORT RICHEY, FL 34655

**FEI Number:** 59-2055139

**Certificate of Status Desired:** No

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

HERITAGE LAKE COMMUNITY ASSOCIATION, INC.  
9151 HERITAGE LAKE BLVD  
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:** RAY GEROUX

06/01/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WOLFE, JUDITH  
Address        9151 HERITAGE LAKE BLVD  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            TREASURER  
Name            SCHAFFHAUSER, CAROL  
Address        9151 HERITAGE LAKE BLVD  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            SECRETARY  
Name            SCHAFFHAUSER, CAROL  
Address        9151 HERITAGE LAKE BLVD  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            VP  
Name            PADDEN, JUDY  
Address        9151 HERITAGE LAKE BLVD  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            DIRECTOR  
Name            ROGERS, EARL  
Address        9151 HERITAGE LAKE BLVD  
City-State-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:** JUDITH WOLFE

PRESIDENT

06/01/2021

Electronic Signature of Signing Officer/Director Detail

Date