#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 755973** 

Entity Name: HERITAGE LAKE COMMUNITY ASSOCIATION, INC.

FILED Feb 14, 2024 Secretary of State 0663990742CC

# **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 02/14/2024

Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title PRESIDENT Title TREASURER

NameWOLFE, JUDITHNameSCHAFFHAUSER, CAROLAddress9151 HERITAGE LAKE BLVDAddress9151 HERITAGE LAKE BLVDCity-State-Zip:NEW PORT RICHEY FL 34655City-State-Zip:NEW PORT RICHEY FL 34655

Title SECRETARY Title VP

Name SCHAFFHAUSER, CAROL Name ROCK, ROBERT

Address 9151 HERITAGE LAKE BLVD Address 9151 HERITAGE LAKE BLVD

City-State-Zip: NEW PORT RICHEY FL 34655

City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR Title DIRECTOR

Name ROGERS, EARL Name MURPHY, BILL

Address 9151 HERITAGE LAKE BLVD Address 9151 HERITAGE LAKE BLVD

City-State-Zip: NEW PORT RICHEY FL 34655

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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 02/14/2024

Date