

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003781

Entity Name: HERITAGE ISLES GOLF AND COUNTRY CLUB COMMUNITY ASSOCIATION, INC.**FILED**
Mar 04, 2019
Secretary of State
5226209371CC**Current Principal Place of Business:**C/O CONDOMINIUM ASSOCIATES
2019 OSPREY LANE
LUTZ, FL 33549**Current Mailing Address:**C/O CONDOMINIUM ASSOCIATES
2019 OSPREY LANE
LUTZ, FL 33549 US**FEI Number: 59-3611940****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BUSH ROSS, P.A
1801 NORTH HIGHLAND AVENUE
TAMPA, FL 33602 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: TIFFANY MCELHERAN, ESQ.****03/04/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	RAWLINS, DAWN
Address	CONDOMINIUM ASSOCIATES 2019 OSPREY LANE
City-State-Zip:	LUTZ FL 33549

Title	VP
Name	ERCHID, AHMAD
Address	CONDOMINIUM ASSOCIATES 2019 OSPREY LANE
City-State-Zip:	LUTZ FL 33549

Title	SECRETARY
Name	PANKEY, JENNIFER
Address	CONDOMINIUM ASSOCIATES 2019 OSPREY LANE
City-State-Zip:	LUTZ FL 33549

Title	PRESIDENT
Name	CORREA, JOHN
Address	CONDOMINIUM ASSOCIATES 2019 OSPREY LANE
City-State-Zip:	LUTZ FL 33549

Title	TREASURER
Name	HODGES, JESSICA L
Address	CONDOMINIUM ASSOCIATES 2019 OSPREY LANE
City-State-Zip:	LUTZ FL 33549

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: JOHN CORREA**PRESIDENT****03/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date