


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 268888.</b> 1. Entity Name HEATHER HILLS GOLF CLUB, INC.	
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Principal Place of Business 101 CORTEZ RD W BRADENTON, FL 34207-1538	Mailing Address 101 CORTEZ RD W BRADENTON, FL 34207-1538
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<b>DO NOT WRITE IN THIS SPACE</b>
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01302004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1003495	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  COPEMAN, RICK 101 CORTEZ RD. BRADENTON, FL 34205
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

000000046660  
02/12/04-80009-021 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P COPEMAN, RICK 101 CORTEZ RD. BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CHEVALIER MELINDA 101 CORTEZ RD BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PORTER DEBBIE 101 CONTEZ RD. W BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/04 941-755-8888  
Date Daytime Phone #