

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # 268888

1. Entity Name
HEATHER HILLS GOLF CLUB, INC.



Principal Place of Business

**101 CORTEZ RD W
BRADENTON, FL 34207-1538**

Mailing Address

**101 CORTEZ RD W
BRADENTON, FL 34207-1538**



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number *
59-1003495

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**COPEMAN, RICK
101 CORTEZ RD.
BRADENTON, FL 34205**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

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

U00000946382
05/30/08-80047-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Rick Copeman
Rick Copeman

Pres.
4/29/08 755-8888
Date Daytime Phone #