## **2001 UNIFORM BUSINESS REPORT (UBR)** May 16, 2001 8:00 am Secretary of State **DOCUMENT # 728891** 1. Entity Name 05-16-2001 90392 037 \*\*\*\*61.25 THE HEATHER PROPERTY OWNERS ASSOCIATION, INC. 8 Principal Place of Business Mailing Address 9100 NAKOMA WAY 9100 NAKOMA WAY **BROOKSVILLE FL 34613 BROOKSVILLE FL 34613** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2033314 Not Applicable \$8.75 Additional Zip Zip Country Country .5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Barbara J. Street Address (P.O. Box Number is Not Acceptable) 9100 Nakoma Way BOWIE, BRUCE T. 9100 NAKOMA WAY **WEEKI WACHEE FL 34613** Zio Code 4613 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. SIGNATURE Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be **Department of State** Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PITD Change ☐ Addition PD X Delete TITLE TITLE Thomas Taylor WAY NAME DOHM, BARBARA NAME STREET ADDRESS STREET ADDRESS 9100 NAKOMA WAY BROOKS VILLE FL 34613 CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL 34613** O V D Addition Change TITLE **VTD** Delete TITLE CARL W DOHM NAME TAYLOR, THOMAS B MAME 9100 NAKOMA WAY STREET ADDRESS 9100 NAKOMA-WAY STREET ADDRESS BROOKS VILLE FL 34613 CITY-ST-ZIP CITY-ST-ZIP WEEKI WACHEE FL 34613 ☐ Change ☐ Addition Delete TITLE TITLE NAME DOHM, BARBARA NAME STREET ADDRESS STREET ADDRESS 9100 NAKOMA WAY CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL 34613** Change ☐ Addition Delete TITLE PIOTROWSKI JEROME 9100 NAKOMA WAY NAME PIOTROWSKI, JEROME D NAME STREET ADDRESS STREET ADDRESS 9100 NAKOMA WAY BROOKSVILLE FL 34613 CITY-ST-7IP CITY-ST-ZIP **BROOKSVILLE FL 34613** Addition 👪 Change TITLE Delete TITLE CAROL JACILLA NAME NAME **CUMMINS. RICHARD** 9100 NAKOMA WAY STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE: 2

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

9100 NAKOMA WAY

9100 NAKOMA WAY

**BROOKSVILLE FL 34613** 

CARSILLO, LAWERENCE

**BROOKSVILLE FL 34613** 

Delete

Brooksuille FL 34613

BROOKS UILLE FL 34613

CARSILLO, LAWRENCE

9100 NAKOMA WAY

352-597-6670

Change

Addition