2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

FILED **DOCUMENT # 729303** Feb 02, 2000 8:00 am 1. Entity Name **Secretary of State** HEATHERTON VILLAGE, UNIT ONE, HOMEOWNERS' ASSOCI 02-02-2000 90118 034 ****70.00 Mailing Address Principal Place of Business PO BOX 160733 PO BOX 160733 ALT, SPRINGS FL 32714 ALT. SPRINGS FL 32714 Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1754055 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WAGNER, RICHARD A 304 E. COLONIAL DRIVE ORLANDO FL 32801 Zip Code 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 TERROGRAPHED SHERMAL TOTAL SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. GAIL RUSSELL Change TITLE **X** Delete TITLE 534 HEATHERTON VILLAGE NAME WHITING, LYNN T NAME STREET ADDRESS STREET ADORESS **513 HEATHERTON VILLAGE** ALTAMONTE SPOS, FL 32714 CITY-ST-ZIP CITY-ST-7IP ALTAMONTE SPRGS FL 32714 BARDARA BOSWELL Change X Addition TITLE n X Delete TITLE HERNDON, BRENDA NAME 598 HEATHERTON VILLAGE NAME STREET ADDRESS STREET ADDRESS 576 HEATHERTIN VILLAGE ALTAMONTE SOUS. FL 32714 CITY-ST-ZIP CITY-ST-7IP ALTAMONTE SPRGS FL 32714 TITI F JANE REUND TITLE ☐ Delete NAME NAME MONGIELLO, TERRI J STREET ADDRESS STREET ADDRESS 530 HEATHERTON VILLAGE CITY-ST-ZIP CITY-ST-ZIP ALTAMONTE SPRGS FL 32714 TITI F ☐ Delete GORDON, MARIE NAME STREET ADDRESS STREET ADDRESS 615 HEATHERTON VILLAGE CITY-ST-7IP CITY-ST-ZIP ALTAMONTE SPRGS FL 32714 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME DITTMANN, LINDA STREET ADDRESS STREET ADDRESS **522 HEATHERTON VILLAGE** CITY-ST-ZIP CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 Change ☐ Addition Delete TITLE NAME NAME CLORE, JEREMY STREET ADDRESS STREET ADDRESS **522 HATHERTON VILLAGE** CITY-ST-ZIP CITY-ST-ZIP ATLAMONTE SPRINGS FL 32714 12. I hereby certify that the information supplied with this filing 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 truetee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if