

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90029 001 ****61.25

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1. Entity Name

HERITAGE HOUSE CONDOMINIUMS II, INC.



Principal Place of Business

1001 PLANTATION DRIVE
KISSIMMEE FL 34741-3856

Mailing Address

1001 PLANTATION DRIVE
KISSIMMEE FL 34741-3856



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1892137

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

ADKINS, EDWIN
1001 PLANTATION DRIVE
KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. 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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME ST
STREET ADDRESS OATMAN, BILL
CITY-ST-ZIP 1001 PLANTATION DR A11
KISSIMMEE FL

TITLE ☐ Delete
NAME D
STREET ADDRESS FAIPLER, ALFRED
CITY-ST-ZIP 1001 PLANTATION DR A2
KISSIMMEE FL 34741

TITLE ☒ Delete
NAME D
STREET ADDRESS WASIELEWSKI, RAY
CITY-ST-ZIP 1001 PLANTATION DR A8
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME P
STREET ADDRESS ADKINS, EDWIN
CITY-ST-ZIP 1001 PLANTATION DR A 1/2
KISSIMMEE FL

TITLE ☐ Delete
NAME D
STREET ADDRESS BRZEZICKI, BOB
CITY-ST-ZIP 1001 PLANTATION DR E5
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Brady, jim
CITY-ST-ZIP 1001 Plantation Dr. A6
Kissimmee, Fl.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: *Ed Adkins* Ed Adkins, Pres. 3/22/06 407 846-2300