

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749285

FILED
Jan 02, 2008
Secretary of State

Entity Name: HEATHER RIDGE VILLAS III ASSOCIATION, INC.

Current Principal Place of Business:

C/O DEVOTED SERVICES FOR PROPERTY MGMT.
319 TAVERNIER DR.
OLDSMAR, FL 34677 US

New Principal Place of Business:

C/O PREMIER PROPERTIES OF PINELLAS, INC.
1587 MAIN ST. #A
DUNEDIN, FL 34698 US

Current Mailing Address:

P.O. BOX 160
OLDSMAR, FL 34677 US

New Mailing Address:

1587 MAIN ST. #A
DUNEDIN, FL 34698 US

FEI Number: 59-2987567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAWLOWSKI, SHARON L
319 TAVERNIER DR.
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

WIBERG, MARIE S
1587 MAIN ST. #A
DUNEDIN, FL 34698 US

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: MARIE S. WIBERG

01/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DORA, RONALD
Address: 1570 HEATHER RIDGE BLVD
City-St-Zip: DUNEDIN, FL 34698

Title: VPD () Delete
Name: ESELY, SANDRA
Address: 1567 HEATHER RIDGE BLVD
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: BOOKMAN, LORETTA
Address: 1540 HEATHER RIDGE BLVD.
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: GOTSHALL, RALPH
Address: 1578 HEATHER RIDGE BLVD
City-St-Zip: DUNEDIN, FL 34698

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: FACHTMANN, ROBERT
Address: 1560 HEATHER RIDGE BLVD
City-St-Zip: DUNEDIN, FL 34698

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD DORA

PD

01/02/2008

Electronic Signature of Signing Officer or Director

Date