

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90021 021 ****61.25

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1. Entity Name
**HERITAGE RIDGE NORTH PROPERTY OWNERS
ASSOCIATION, INC.**

Principal Place of Business
**6510 HERITAGE RIDGE BOULEVARD
HOBE SOUND, FL 33455**

Mailing Address
**5757 SE FEDERAL HWY
STUART, FL 34997 US**

40010056



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2524653

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ROSS, DEBORAH L
ROSS, EARLE & BONAN, P.A.
759 SOUTH FEDERAL HWY, SUITE 212
STUART, FL 34994**

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 renating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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 **SD** ☒ Delete
NAME **GRIMBILAS, DOT**
STREET ADDRESS **6128 SE GEORGETOWN PLACE**
CITY-STATE-ZIP **HOBE SOUND, FL 33455**

TITLE **PD** ☐ Delete
NAME **PHELPS, RICHARD A.**
STREET ADDRESS **6597 SE ROANOKE COURT**
CITY-STATE-ZIP **HOBE SOUND, FL**

TITLE **VP** ☐ Delete
NAME **WOBBEKIND, WILLIAM**
STREET ADDRESS **7324 SE JAMESTOWN TERRACE**
CITY-STATE-ZIP **HOBE SOUND, FL 33455**

TITLE **T** ☐ Delete
NAME **DALLAFIOR, ALBERT**
STREET ADDRESS **6993 SE BUNKER HILL DR**
CITY-STATE-ZIP **HOBE SOUND, FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SD** ☒ Change ☐ Addition
NAME **Joan A. Miller**
STREET ADDRESS **7185 SE Quincy Terr.**
CITY-STATE-ZIP **Hobe Sound, Fl. 33455**

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

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

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

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 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: Richard A. Phelps **RICHARD A. PHELPS**

1-22-08 **772-287-8882**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #