

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 753330

1. Entity Name

HEATHER RIDGE WEST IV ASSOCIATION, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90168 041 ****61.25

Principal Place of Business

Mailing Address

3438 EAST LAKE RD
#22
PALM HARBOR FL 34685
US

3438 EAST LAKE RD
#22
PALM HARBOR FL 34685-2413
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

32708 US 19 NORTH

32708 US 19 NORTH

City & State

City & State

PALM HARBOR FL

PALM HARBOR FL

Zip

Country

Zip

Country

34684 USA

34684 USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOLAN, JAMES M
3438 EAST LAKE RD
#22
PALM HARBOR FL 34685

Name

MARJORIE J. BROWN

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

90 CALIBER CONDO MOT

32708 US 19 NORTH

City

PALM HARBOR

FL

Zip Code

34684

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME REITER, SIMONE
STREET ADDRESS 7482 BRIDGEWATER LN //
CITY-ST-ZIP SPRING HILL FL 34606

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

TITLE SD ☒ Delete
NAME LIZARDY, TED
STREET ADDRESS 1370 HEATHER RIDGE #
CITY-ST-ZIP DUNEDIN FL 34698

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

TITLE TD ☐ Delete
NAME RYAN, ELEANOR P
STREET ADDRESS 1370 HEATHER RIDGE #109
CITY-ST-ZIP DUNEDIN FL 34698

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

TITLE TD ☐ Delete
NAME MUSCHICK, GEORGE J
STREET ADDRESS 1370 HEATHER RIDGE #108
CITY-ST-ZIP DUNEDIN FL

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

TITLE ☐ Delete
NAME JEAN LOMOLINI
STREET ADDRESS 1370 HEATHER RIDGE #202
CITY-ST-ZIP DUNEDIN, FL

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

TITLE ☐ Delete
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)