

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 8:00 am
Secretary of State

02-25-2005 90144 041 ****61.25

DOCUMENT # 754329 1. Entity Name HERITAGE PINES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4400 EL CONQUISTADOR PKWY #1 BRADENTON, FL 34210			Mailing Address 4400 EL CONQUISTADOR PKWY, #1 HARMONY MANAGEMENT BRADENTON, FL 34210		
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 59-2290588				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HAGERTY, JOHN A 4400 EL CONQUISTADOR PKWY #1 BRADENTON, FL 34210			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HAMM, CULLEN		NAME		
STREET ADDRESS	4114 78TH STREET WEST		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	DP		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HERRON, JACK		NAME	Spencley, Paul	
STREET ADDRESS	4011 78TH STREET WEST		STREET ADDRESS	5620 2nd Ave Dr. W.	
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP	Bradenton FL 34209-2646	
TITLE	D		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PRELL, GERRY		NAME		
STREET ADDRESS	6410 A AVENUE MADERIA		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
TITLE	D		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	O'QUINN, VAN		NAME	Young, Cindy	
STREET ADDRESS	462 1ST STREET		STREET ADDRESS	PO Box 345	
CITY-ST-ZIP	GENEVA, FL 32732		CITY-ST-ZIP	GRAYS LAKE IL 60030	
TITLE	DVP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZANELLA, ISSABELLA		NAME		
STREET ADDRESS	4321 78TH STREET W.		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Van O'Quinn</i> 2-17-05					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					