FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 755866 1. Corporation Name (1)

HEATHER RIDGE VILLAS V ASSOCIATION, INC.

Principal Place of Business 1700 McMullen Booth Rd. Mailing Address

Suite C-3

1700 McMullen Booth Rd. Suite C-3

Clearwater, Fl. 34619

Clearwater, Fl. 34619

						01/13/1981	3a. Uate of 2	71995
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-2509638		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.	75 Additional
22		27				Certificate of Status Besireo	LJ F	ee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	AI	dded to Fees
Zip	Country 25	Zip	Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes ☐ No		
24	9. Name and Address of Current Registered Agent			I	Florida Statutes 1.7 Yes No 10. Name and Address of New Registered Agent			
				81 Name				
Lennaro	A. Leighton							
C/O Seaboard Arbors Management Services				S 82 Street Address (P.O. Box Number is Not Acceptable)				
1700 McMullen Booth Rd., Suite C-3				63		·		
Clearwa	iter, Florida 34	619						
				84 Cr	ty		E 85	Zip Code
11. Pursuant t	the provisions of Sections 617.0502	and 617.1508. Florida Statute	as, the abo	ve-name	ed corporati	ion submits this statement for the purpo	nse of changing	its registered office
or register	ed agent, or both, in the State of Floric h, and accept the obligations of, Section	ia. Such change was authorizi	ed by the c	corporati	on's board	of directors. I hereby accept the appoir	itment as registe	ered agent. I am
	in, and accept the obligations of, Section	on o moods, Florida Statutes						
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable (NO	TE Registered	Agent sign	ature required w	nen renstahigi	DATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	CTORS IN 12
TITLE	PD	DELETE	1 1 Ti	TLE			☐ Chan	ge 🔲 Addition
NAME	Goldman, Robert			AME				
STREET ADDRESS	1577 Patton Drive			REET ADDR	RESS			
CITY-ST-ZIP	Dunedin, Fl. 34	698	14 CI	TY - ST - ZIP	.			
TITLE	VD	DELETE	2 1 TI	TLE	SD		K €han	ge 🔲 Addition
NAME	Magio, Dolores		2 2 N/	AME				
STREET ADDRESS	1541 Patton Driv	<i>r</i> e	2351	TREET ADDE	RESS	SAAAAA 195.	1075	
CITY-ST-ZIP	Dunedin, Fl.	34698	2 4 0	ITY - ST - ZIF	9	50000185 	ຂໍ້-ກໍາວ	
TITLE	SD	™ DELETE	3 1 Ti	TLE		***61.25	Chan	ge 🔲 Addition
NAME	Dreyer, Dorothy		3 2 N/	AME				
STREET ADDRESS	1567 Patton Drive			REET ADDE	RESS			
CITY-ST-ZIP	Dunedin, Fl. 34	4698	3 4. C	TY-ST-ZIF				
TITLE		DELETE	4 1 11		ŲΦ		☐ Chan	ge 🗶 Addition
NAME			4 2 N		I .	rer, Robert		
STREET ADDRESS			4 3 ST	REFT ADDA	1	7 Patton Drive		
CITY-ST-ZIP		Document	_	TY-ST-ZIP	Dun	edin, F1. 34698	from a	
TITLE		DELETE	5 1 Ti		Þ		Chan	ge 🙀 Addition
NAME			5 2 N/			h, Joseph		
STREET ADDRESS			5381	REET ADDR	RESS 1 55	l Patton Drive		
CiTY-ST-ZIP		Document		TY-ST-ZIP	_ bun	edin, Fl. 34698		
TITLE		DELETE	6 1 Ti		þ		☐ Chan	ge 🔀 Addition
NAME			62 NA		Wes	t, Arthur		
STREET ADDRESS			1	REET ADDR	ESS [54	7 Patton Drive		
CITY-ST-ZIP			6 4 CI	TY - \$T - ZIP	pun	edin, F1. 34698		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 many appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Daytime Phone ¥