

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90062 011 ****61.25

DOCUMENT # 755866

1. Entity Name

HEATHER RIDGE VILLAS V ASSOCIATION, INC.



Principal Place of Business

**40347 US 19N
STE 201
TARPON SPRINGS FL 34689
US**

Mailing Address

**P.O. BOX 695
TARPON SPRINGS FL 34689
US**

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 **59-2509638**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KARAGIANIS, IRENE
40347 US 19N
#201
TARPON SPRINGS FL 34689**

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 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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☒ **D**
NAME **LEWIS, DONALD**
STREET ADDRESS **1581 PATTON DR**
CITY-ST-ZIP **DUNEDIN FL 34698**

☐ Delete

TITLE ☒ **VPD**
NAME **GOLDMAN, ROBERT**
STREET ADDRESS **1577 PATTON DRIVE**
CITY-ST-ZIP **DUNEDIN FL 34698**

☐ Delete

TITLE ☒ **PD**
NAME **OBERER, ROBERT**
STREET ADDRESS **1537 PATTON DRIVE**
CITY-ST-ZIP **DUNEDIN FL 34698**

☐ Delete

TITLE ☒ **D**
NAME ~~**TYSON, HARRY**~~
STREET ADDRESS ~~**1531 PATTON DRIVE**~~
CITY-ST-ZIP ~~**DUNEDIN FL 34698**~~

☒ Delete

TITLE ☐
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE ☐
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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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]
SIGNATURE REQUIRED

2/25/03

727-942-4755
727-942-4758

CR2E037 (10/02)