

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90186 009 \*\*\*\*61.25

**DOCUMENT # 762895**

1. Entity Name

HERITAGE VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

1101 RANCH ROAD  
VERO BEACH FL 32966

Mailing Address

416 UNION ST  
VERO BEACH FL 32966

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

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2181689

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLARK, ROBERT C  
1936 41TH AVE.  
VERO BEACH FL 32966

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**  
**Due By May 1, 2007**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D ☐ Delete  
NAME: CHAPUT, LORRAINE  
STREET ADDRESS: 80 COMMONWEALTH DR  
CITY-STATE-ZIP: VERO BEACH FL 32966

TITLE: ☐ Change ☒ Addition  
NAME: Wolf, Bruce  
STREET ADDRESS: 106 Congress St.  
CITY-STATE-ZIP: Vero Beach, FL 32966

TITLE: V ☐ Delete  
NAME: GRIFFIN, ANN  
STREET ADDRESS: 181 CONGRESS ST. 405 Union Street  
CITY-STATE-ZIP: VERO BEACH FL 32966

TITLE: ☐ Change ☒ Addition  
NAME: Ryan Joseph  
STREET ADDRESS: 88 Commonwealth Dr  
CITY-STATE-ZIP: Vero Beach, FL 32966

TITLE: P ☐ Delete  
NAME: SHIELD, WILLIAM JR  
STREET ADDRESS: 362 HERITAGE BLVD  
CITY-STATE-ZIP: VERO BEACH FL 32966

TITLE: ☐ Change ☒ Addition  
NAME: Drapeau, Phillip  
STREET ADDRESS: 553 Plymouth St  
CITY-STATE-ZIP: Vero Beach FL 32966

TITLE: D ☐ Delete  
NAME: HOLTON, JOAN  
STREET ADDRESS: 509 PLYMOUTH ST  
CITY-STATE-ZIP: VERO BEACH FL 32966

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

TITLE: T ☐ Delete  
NAME: COLBERT, MARIAN  
STREET ADDRESS: 416 UNION ST  
CITY-STATE-ZIP: VERO BEACH FL 32966

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

TITLE: D ☐ Delete  
NAME: STREETER, JOSEPH  
STREET ADDRESS: 1106 FRIENDSHIP DR  
CITY-STATE-ZIP: VERO BEACH FL 32966

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 Section 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: *Marian Colbert* **Marian Colbert**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER 772  
3-25-07 564-8930  
Date Daytime Phone #