

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2008 8:00 am
Secretary of State

07-18-2008 90015 029 ****61.25

DOCUMENT # 765416 1. Entity Name MUIRFIELD HEATH HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2004 LONGMEADOW SARASOTA, FL 34235			Mailing Address 2004 LONGMEADOW SARASOTA, FL 34235		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		07092008 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2227160	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FROMM, CLIFFORDE 3015 ROSE MEAD SARASOTA, FL 34235				7. Name and Address of New Registered Agent Name HOEGEL WILLIAM J Street Address (P.O. Box Number is Not Acceptable) 3014 ROSEMEAD City SARASOTA FL Zip Code 34235	
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 WILLIAM J HOEGEL PRESIDENT <i>William J Hoegel</i> DATE 7-18-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by September 12, 2008		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 NAME STREET ADDRESS CITY-ST-ZIP	D HOEGEL, WILLIAM J 3014 ROSEMEAD SARASOTA, FL 34235	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOEGEL WILLIAM J 3014 ROSEMEAD SARASOTA FL 34235	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEATTIE, ROBERT 3148 HEATHERWOOD LANE SARASOTA, FL 34235	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FROMM, CLIFFORD 3015 ROSE MEAD SARASOTA FL 34235	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO FORD, MICHAEL 3028 ROSEMEAD SARASOTA, FL 34235	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARDEN MARY 2961 HEATHER BOW SARASOTA FL 34235	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FROMM, CLIFFORD 3015 ROSEMEAD SARASOTA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FROMM CLIFFORD 3028 ROSEMEAD SARASOTA FL 34235	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRAUS, PETER 2914 HEATHER BOW SARASOTA, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARDEN MARY 2961 HEATHER BOW SARASOTA FL 34235	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEDGER, MARILYN 3017 ROSE MEAD SARASOTA, FL 34235	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 <i>William J Hoegel</i> WILLIAM J HOEGEL PRESIDENT DATE 7-18-08 Daytime Phone # 941 343-0647					

ATTACHMENT

60045148
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MUIRFIELD HEATH HOMEOWNERS ASSOCIATION BALANCE SHEET FOR TWELVE MONTHS ENDING

31-Dec-07

ASSETS

Bank	\$13,795.54
Accounts Receivable	525.00
Prepaid Expense	<u>264.00</u>
TOTAL ASSETS	<u><u>\$14,584.54</u></u>

LIABILITIES

Prepaid Assessments	\$12,100.00
Owner Equity Dec 31, 2006	\$8,412.22
Twelve Mths Operations	<u>-5,927.68 2,484.54</u>
TOTAL LIABILITIES & EQUITY	<u><u>\$14,584.54</u></u>

ATTACHMENT

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MUIRFIELD HEATH HOME OWNERS ASSOCIATION

INCOME STATEMENT FORTWELVE MONTHS ENDING

31 Dec-07

INCOME	ACTUAL		BUDGET	
Maintenance fees	\$98,700.00		\$98,700.00	
Other	<u>278.91</u>	\$98,978.91	<u>300.00</u>	99,000.00
EXPENSES				
Grounds-Lawns	\$50,266.00		\$45,000.00	
-Trees	7,112.50		7,000.00	
Fertilizer & Pest control	15,062.50		13,500.00	
Pool-Maintenance	4,810.44		4,000.00	
-Repairs	2,191.52		1,000.00	
Electricity	3,373.05		3,600.00	
Water/sewage	1,395.57		1,600.00	
Insurance	2,146.58		1,000.00	
Taxes/Permits	61.25		300.00	
Office	163.42		300.00	
Legal	125.42		400.00	
Other	9.50		300.00	
Cable TV	<u>18,188.84</u>	104,906.59	<u>19,000.00</u>	97,000.00
RETAINED EARNINGS	<u><u>-\$5,927.68</u></u>		<u><u>\$2,000.00</u></u>	