


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90191 040 ****61.25

DOCUMENT # 765658 1. Entity Name HERITAGE VILLAGE WEST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4100 66TH STREET CIRCLE WEST BRADENTON, FL 34209			Mailing Address C/O DELLCOR MGT 310 PEARL AVENUE SARASOTA, FL 34243		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2443026	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DELLCOR MGMT, INC. 310 PEARL AVE. SARASOTA, FL 34243				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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 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 SEAMANS, JERRY 4249-66 ST. CIR. W BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BLICKENDERFER, REATH 4291 66TH Street Circle W. Bradenton FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUNCE, ROBERT 4116 66TH ST. DR W BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MCKINCH, VAUGHAN L 4225 66TH ST CIR W BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GUTHAN, DONALD 4148 66TH SDT. CIR. W BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ALTEMARI, PAUL 4193 66TH ST CIR W BRADENTON, FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROWNING, JANE 4221 66TH ST. CIR. W BRADENTON, FL 34209	<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>Reath Blickenderfer</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 9/28/08 Daytime Phone # 358-3366		