

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90337 012 ****61.25

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

90097289

DOCUMENT # 766214	
1. Entity Name HEATHERWOOD CONDOMINIUM ASSOCIATION, INC.	
Principal Place of Business 5899 WHITFIELD AVENUE SUITE 107 SARASOTA, FL 34243 US	Mailing Address 5899 WHITFIELD AVENUE SUITE 107 SARASOTA, FL 34243 US
2. Principal Place of Business 9031 Town Center Pkwy Suite, Apt. #, etc. Bradenton, FL City & State Zip 34202 Country USA	3. Mailing Address 9031 Town Center Pkwy Suite, Apt. #, etc. Bradenton, FL City & State Zip 34202 Country USA
4. FEI Number 59-2482333	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ADVANCED MANAGEMENT OF SW FLORIDA, INC. 5899 WHITFIELD AVENUE, SUITE 107 SARASOTA, FL 34243	
7. Name and Address of New Registered Agent Name: Advanced Management Street Address (P.O. Box Number is Not Acceptable): 9031 TOWN CENTER PKWY City: Bradenton FL Zip Code: 34202	
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] DATE: 4-17-03	
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD NAME: BAKER, DON STREET ADDRESS: 5442 11TH STREET CIRCLE EAST CITY-ST-ZIP: BRADENTON, FL 34203	TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]
TITLE: SD NAME: MUGRAGE, DONNA STREET ADDRESS: 5426 11TH STREET CIRCLE EAST CITY-ST-ZIP: BRADENTON, FL 34203	TITLE: TD NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]
TITLE: DT NAME: WALSH, PATRICIA STREET ADDRESS: 5422 11TH ST. CIR. CITY-ST-ZIP: BRADENTON, FL 34203	TITLE: SD NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]
TITLE: VP NAME: FORMOSA, RICHARD STREET ADDRESS: 5310 11TH ST. CIR CITY-ST-ZIP: BRADENTON, FL 34203	TITLE: VP NAME: Pardue, Beakie STREET ADDRESS: 5315 11th St. Cir. E. CITY-ST-ZIP: Bradenton, FL 34203
TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]	TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]
TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]	TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]
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 517, 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] DATE: [Blank] Copying Photo # [Blank]	