

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90012 014 ***150.00

0005450
AV**DOCUMENT # H68753**

1. Entity Name

HERITAGE BANK OF NORTH FLORIDA

Principal Place of Business

**794 BLANDING BLVD.
P O BOX 2107
ORANGE PARK FL 32067-2107**

Mailing Address

**794 BLANDING BLVD.
P O BOX 2107
ORANGE PARK FL 32067-2107**

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 **59-2559367**Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

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.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD HEAD, ROBERT J., JR. 841 SORRENTO ROAD JACKSONVILLE FL <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 HUNTLEY, LOUIS L. 104 MILWAUKE AVE ORANGE PARK FL <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	PD PITTS, DONALD M. 2592 ASHFORD COURT ORANGE PARK FL <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	SV REINEKE, LOIS 292 EDINBURGH LANE ORANGE PARK FL <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 MORRIS, SHELDON A. 6975 OLD CHURCH ROAD GREEN COVE SPGS. FL <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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-11-02

Date

904-272-2265

Daytime Phone *

CR2E034 (9/01)

Attachment

2002 UNIFORM BUSINESS REPORT (UBR)

H 68453
718138

HERITAGE BANK OF NORTH FLORIDA
POST OFFICE BOX 2107
ORANGE PARK, FL 32067-2107

59-2559367

NO. 11 CONTINUED - OFFICERS AND DIRECTORS:

D
MARVIN E. WILHITE
2050 ALPHA COURT
ORANGE PARK, FL 32073

D
DEBORAH S. PASS
1028 FRUIT COVE ROAD
JACKSONVILLE, FL 32259

VP
MARY LOU DOHERTY
2256 HIRSCH COURT
JACKSONVILLE, FL 32216

VP
REMI VENTURA
5630 COLDSTREAM COURT
JACKSONVILLE, FL 32222

VP
CHARLOTTE A. HALL
7740 PLANTATION BAY DRIVE
JACKSONVILLE, FL 32244

SVP
CHARLES S. SCHULZ
100 PITTS STILL ROAD
PONTE VEDRA BEACH, FL 32082