

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M88446

1. Entity Name

HERITAGE LAND GROUP, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90015 014 ***150.00

Principal Place of Business

11217 SAN JOSE BLVD
JACKSONVILLE FL 32223
US

Mailing Address

11217 SAN JOSE BLVD
JACKSONVILLE FL 32223-7230
US

2. Principal Place of Business

3030 Hartley Road

3. Mailing Address

3030 Hartley Road

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

Suite 100

City & State

Jacksonville, Florida

City & State

Jacksonville, Florida

4. FEI Number

59-0458709

Applied For

Not Applicable

Zip

32257

Country

Duval

Zip

32257

Country

Duval

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

HINSON, DONALD P
11217 SAN JOSE BOULEVARD
JACKSONVILLE FL 32223

Name

Street Address (P.O. Box Number is Not Acceptable)

3030 Hartley Road, Suite 100

City

Jacksonville

FL

Zip Code
32257

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. 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 | <input type="checkbox"/> De'te |
|-------|-------------------|---------------------|-----------------|--------------------------------|
| DT | HUTSON, DAVID W. | 11217 SAN JOSE BLVD | JACKSONVILLE FL | <input type="checkbox"/> |
| DP | HINSON, DONALD P. | 11217 SAN JOSE BLVD | JACKSONVILLE FL | <input type="checkbox"/> |
| S | COX, ELINORE C | 11217 SAN JOSE BLVD | JACKSONVILLE FL | <input type="checkbox"/> |
| VPD | HUTSON, NANCY | 11217 SAN JOSE BLVD | JACKSONVILLE FL | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
|-------|------|------------------------------|-----------------------------|--|
| | | 3030 Hartley Road, Suite 100 | Jacksonville, Florida 32257 | <input type="checkbox"/> |
| | | 3030 Hartley Road, Suite 100 | Jacksonville, Florida 32257 | <input type="checkbox"/> |
| | | 3030 Hartley Road, Suite 100 | Jacksonville, Florida 32257 | <input type="checkbox"/> |
| | | 3030 Hartley Road, Suite 100 | Jacksonville, Florida 32257 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

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:

Elinore C. Cox
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elinore C. Cox 4/5/00 904/262-7718

Date

Daytime Phone #

CR2E034 (9/99)