

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 10, 2007 8:00 am**  
**Secretary of State**

04-10-2007 90019 016 \*\*\*\*61.25

**DOCUMENT # N00000000860**

1. Entity Name

WEDGWOOD VILLAGE OF HERITAGE SPRINGS, INC.



Principal Place of Business

40347 US 19 NORTH  
SUITE 201  
TARPON SPRINGS FL 34689

Mailing Address

PO BOX 695  
TARPON SPRINGS FL 34689



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-3682576

Applied For

Not Applicable

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

KARAGIANIS, IRENE  
40347 US 19 NORTH SUITE 201  
TARPON SPRINGS FL 34689

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete  
NAME DP  
STREET ADDRESS TERIO, RICHARD  
CITY-ST-ZIP 1326 CANBERLEY CT  
TRINITY FL 34655

TITLE ☐ Delete  
NAME DVP  
STREET ADDRESS KAMPMANN, FRED  
CITY-ST-ZIP 1430 CANBERLY COURT  
NEW PORT RICHEY FL 34655

TITLE ☒ Delete  
NAME DST  
STREET ADDRESS HOLLAND, REGINA  
CITY-ST-ZIP 1325 CANBERLEY CT  
TRINITY FL 34655

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME PRES.  
STREET ADDRESS PATRICK GRANOWSKI  
CITY-ST-ZIP 1528 CANBERLY COURT  
TRINITY FL 34655

TITLE ☐ Change ☒ Addition  
NAME TREAS/SECY.  
STREET ADDRESS MICHAEL SYSAK  
CITY-ST-ZIP 1332 CANBERLY COURT  
TRINITY FL 34655

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/07 727 376-3363  
Date Daytime Phone #