

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00403

FILED  
Mar 16, 2009  
Secretary of State

**Entity Name:** LAKE HEATHER OAKS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

16706 ROLLING ROCK DRIVE  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 271411  
TAMPA, FL 33688

**New Mailing Address:**

**FEI Number:** 59-2338989

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRUDNY, MICHAEL ESQ  
200 NORTH PINE AVENUE, STE A  
OLDSMAR, FL 346774613 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MACALISTER, JAMES  
Address: 16813 ROLLING ROCK DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Delete  
Name: GLAS, PAMELA  
Address: 16705 ROLLING ROCK DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: O'SULLIVAN, KEVIN  
Address: 16640 VALLELY DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: T ( ) Delete  
Name: WILKINS, KEVIN A  
Address: 16706 ROLLING ROCK DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: S ( ) Delete  
Name: WALLS, ROBERTA  
Address: 16504 CRANWOOD PLACE  
City-St-Zip: TAMPA, FL 33618

Title: D (X) Delete  
Name: STUDDMAN, JAY  
Address: 3127 LAKESTONE DRIVE  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: STUDDTMANN, JAY  
Address: 3127 LAKESTONE DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: O'SULLIVAN, KEVIN  
Address: 16640 VALLELY DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN A. WILKINS

T

03/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date