■ Applied For ?= Not Applicable \$8.75 Additional

FILED

02-25-1999 90008 050 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N02667

1. Corporation Name

HEATHE	ERWOOD VILLAGE RESI	IDENTS ASSOCIATION, IN	łC.							
Principal Plac	ce of Business	Mailing Address	Mailing Address 1925 HARDEN BLVD BOX 310 LAKELAND FL 33803 US							
1925 HARDEN BOX 310 LAKELAND FL US		BOX 310 LAKELAND FL 33803								
2. Principal f	Place of Business	2a. Mailing Address				3. Date Incorporated or Qualifed				
21		26	26			04/20/1984				
Sulte, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			-4. FEI Number Applied Fo			lied For	
22		27				59-2522716		Not	Applicabl	
City & Sta	ite	City & State	⊢ , ′			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
Zip	Country 25	Zip 29	Cour	ntry		6. Election Campaign Financing Trust Fund Contribution	•	5.00 N	•	
	9. Name and Address of C		1241			10. Name and Address of New Regist	ered Agent	t		
DCII CII	zabeth l			81	Name Street Addre	ess (P.O. Box Number is Not Acceptable)		<u>-</u>		
,,	RDEN BLVD			-	Oll Col Fidding					
LOT 20	IDEN DEVD			83					•	
LAKELAND FL 33803				84	City		FL 85			
office or agent. I a	registered agent, or both, in the am familiar with, and accept the	17.0502 and 617.1508, Florida Stati State of Florida. Such change was obligations of, Section 617.0503, F	authorized	DV 1	the corporation	oration submits this statement for the purpon's board of directors. I hereby accept the	se of chang appointmen	jing its r it as regi	egistered istered	
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicable. (NOT	TE: Registered	Agent	signature required	milati tonibtanilgi	TÉ			
12.	OFFICE	RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER			·	
TITLE	DP	≥ DELETE	1.1 TIT	LE	DP		™ C	hange	Additi	

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Reg	nistered Agent signature n	equired when reinstating) DATE					
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN					
TITLE	DP (X	DELETE	1.1 TITLE	DP	Change	Addition			
NAME	MEDFORD SCHNAUBER		1.2 NAME	Ken Raynur Blvd Lot 262					
STREET ADDRESS	1925 HARDEN BLVD LOT 236		1.3 STREET ADDRESS	Lakeland Fl. 33803					
CITY-ST-ZIP	LAKELAND FL 33803		1.4 CITY-ST-ZIP						
TITLE	DV	DELETE	2.1 TITLE	DY	Change	☐ Addition			
NAME	WAYNE DONALDSON		2.2 NAME	Weaver, Jack 1925 Harden Bludt					
STREET ADDRESS	1925 HARDEN BLVD LOT 308		2.3 STREET ADDRESS	Lakeland, Fl 33803					
CITY-ST-ZIP	LAKELAND FL 33803		2. 4 CITY-ST-ZIP	Lakelana, 11 33803		53 4 (19)			
TITLE	DS	DELETE	3.1 TITLE		Change	Addition			
NAME	ASSINK, JUDY		3.2 NAME		•				
STREET ADDRESS	1925 HARDEN BLVD LOT 253		3.3 STREET ADDRESS						
CITY-ST-ZIP	LAKELAND FL		3.4. CITY-ST-ZIP						
TITLE	DT] DELETE	4.1 TITLE		Change	Addition			
NAME	BELL, ELIZABETH L		4.2 NAME						
STREET ADDRESS	1925 HARDEN BLVD とっす 80		4.3 STREET ADDRESS						
CITY-ST-ZIP	LAKELAND FL		4.4 CITY-ST-ZIP		d= 0.	=			
TITLE	D 25	DELETE	5.1 TITLE	P 1 C 100 0	Change	☐ Addition			
NAME	WEAVER, JACK		5.2 NAME	Foley Grace Blod 1925 Harden Blod					
STREET ADDRESS	1925 HARDEN BLVD LOT 164		5.3 STREET ADORESS	1472 Hanger 2003					
CITY-ST-ZIP	LAKELAND FL		5.4 CITY-ST-ZIP	Lakeland Fl. 33803					
TITLE	D	DELETE	6.1 TITLE D	Higby, Dave	Change Change	☐ Addition			
NAME	BROXON, BONNIE	l l	6.2 NAME	1925 Harden Blud Lot 61					
STREET ADDRESS	1925 HARDEN BLVD LOT 283		6.3 STREET ADDRESS	Lakeland, Fl. 33803					
CITY-ST-ZIP	I AKELAND FI		6.4 CITY-ST-ZIP	Tare(440) LI. 22907					

LAKELAND FL 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Date