## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000011828

**FILED** May 03, 2005 Secretary of State

Entity Name: LEGACY AT HERITAGE LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 9456 PHILLIPS HWY STE 1 JACKSONVILLE, FL 32256

**Current Mailing Address: New Mailing Address:** 

9456 PHILLIPS HWY STE 1 C/O MAY MANAGEMENT JACKSONVILLE, FL 32256 5455 A1A SO ST AUGUSTINE, FL 32080

FEI Number: 20-2326943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BLOODWORTH, SUSAN S ESQ 170 MALAGA STREET STE A ST AUGUSTINE, FL 32084

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

JONES, KENNETH JOHNS, KENNETH Name: Name: Address: 9456 PHILLIPS HWY STE 1 Address: 9456 PHILLIPS HWY STE 1

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: Title: ( ) Delete () Change () Addition Name: KAKOSKE, JOHN Name: Address: 9456 PHILLIPS HWY STE 1 Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip:

Title: DST () Delete Title: () Change () Addition

DOAN, JAN Name: Name: 9456 PHILLIPS HWY STE 1 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KENNETH JOHNS **PRES** 05/03/2005