

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 21, 2007 08:00 A
Secretary of State

DOCUMENT # N05000000791

1. Entity Name
**HOLDEN HEIGHTS COMMUNITY DEVELOPMENT
CORPORATION**



Principal Place of Business
**1224 26TH STREET
ORLANDO, FL 32805**

Mailing Address
**1224 26TH STREET
ORLANDO, FL 32805**



05142007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3798438

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRADLEY, L.C
2631 MARQUISE CT.
ORLANDO, FL 32805**

**DO NOT WRITE
IN THIS SPACE**

B. 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

L.C. Bradley

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5-14-07

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRADLEY, L.C. 2631 MARQUISE CT. ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STAPLETON, RHONDA 1217 22ND STREET ORLNADO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRIGHT, RUDOLPH 1516 EAST HALICREST STREET #304 ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BASS, SHEILA 2403 SHORTLEAF CT. ORLANDO, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM GRIFFIN, JIM 301 SW 145TH ST OCALA, FL 34473
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000765013
05/31/07-80022-001 70.00

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

Date

Daytime Phone #

5-14-07