

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010210

FILED
Jul 05, 2007
Secretary of State

Entity Name: HERITAGE OAKS OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6215 WILSON BLVD
JACKSONVILLE, FL 32210

New Principal Place of Business:

463499 SR W200
YULEE, FL 32097

Current Mailing Address:

6215 WILSON BLVD
JACKSONVILLE, FL 32210

New Mailing Address:

P O BOX 1987
YULEE, FL 32041 US

FEI Number: 20-5652517 **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:

RICHARDSON, LINDA J
6215 WILSON BLVD
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC
463499 SR 200
YULEE, FL 320411987 US

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: TERRELL J POWELL

07/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TOWERS, WILLIAM B III
Address: 6215 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DV () Delete
Name: TOWERS, ELIZABETH F
Address: 6215 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DST (X) Delete
Name: RICHARDSON, LINDA J
Address: 6215 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVST (X) Change () Addition
Name: TOWERS, ELIZABETH F
Address: 6215 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

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: WILLIAM B TOWERS, III

PD

07/05/2007

Electronic Signature of Signing Officer or Director

Date