2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N06000013138

1. Entity Name

HERITAGE CREEK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

779 COMMERCE DRIVE, STE. 14

VENICE, FL 34292

Mailing Address

779 COMMERCE DRIVE, STE. 14

VENICE, FL 34292

FILED Jan 28, 2008 08:00 AN Secretary of State



01042008 No Chg-NP

CR2E037 (4/06)

4. FEt Number 20-8246638

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREIG, MICHAEL K 779 COMMERCE DRIVE, STE. 14 VENICE, FL 34292

DO NOT WRITE

I				IN THIS SPACE			
8. The above the obliga	e named entity submits this statement for the p tions of registered agent.	urpose of changing its registered c	ffice or	registered agent, or bo	th, in the State of Florida	a. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registered Age	nt signatur	e required when reinstating)		DATE	
	Filling Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution.	3 🗆	\$5.00 May Be Added to Fees			
10.' TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS GATES, JEFFREY O 779 COMMERCE DRIVE, STE. 14 VENICE, FL 34292				000000803 02/05/08-800	249 17-017 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEE, DONALD C 2212 6TH STREET SARASOTA, FL 34237			DQ	NOT WE	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPA	ACE	
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TITLE NAME STREET ADDRESS			. .	٠ ,		onen e e e	

12. Thereby certify that the information supplied with this filling 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.

CIGNATUDE.

CITY-ST-ZIP