## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Horthom

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N31225

(8)

## HEATHER LAKES AT BRANDON COMMUNITY ASSOCIATION,

Principal Place of Business C/O UNIVERSITY PROPERTIES 824 E FLETCHER AVE TAMPA FL 33612

2. P

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Mailing Address

C/O UNIVERSITY PROPERTIES 824 E FLETCHER AVE TAMPA FL 33612-2613

rincipal Place of Business	2a. Mailing Address
	26
ulte, Apt. #, etc.	Suite, Apt. #, etc.

City & State City & State 28 Zip Country Zip Count

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified 03/16/1989 3a. Date of Last Report 03/18/1996 4. FEI Number 59-2949601 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

**FILED** 

Jun 19 1997 8:00am

Secretary of State

	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
ry	This corporation has liability to Florida Statutes	r intangil Yes	ole tax under s. 199.032,
	40 11		-I A

DUARTE, ANTONIO I
11959 N FLORIDA AVE
TAMPAFFL 33812

10. Name and Address of New Registered Agent						
81	Name					
62	Street Address (	P.O. Box Nun	nber is Not A	cceptable)	<del></del>	
83			<del></del>			
84	City	-			85	Zin Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered

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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered agent and title if apolice	able (NOTE: 6	Ignistered Agent signature	e required when rainstaling)	DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TITLE	#D	Change Addition
NAME	BUSH, WILLIAM		1.2 NAME	Sikorski, Fred	
STREET ADDRESS	311 PARK PLACE, S-600		1.3 STREET ADDRESS	311 Park Place 5-600	2
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY - ST - ZIP	Clearworks, U.	
TITLE	VP	DELETE	21 TITLE	UOID	Change Addition
NAME	MILLER, FRANCINE		2.2 NAME	Miller Francine 311 Parkplace-5-60	
STREET ADDRESS	311 PARK PLACE, S-600		2.3 STREET ADDRESS	311 Park Place - 5.60	)
CHTY-ST-ZIP	CLEARWATER FL		2. 4 CITY - ST - ZIP	Chearwater, FL	
TITLE	SO	DELETE	3.1 TITLE	5/0	Change Addition
NAME	PEREZ, PETER		3.2 NAME	Perez Peter	
STREET ADDRESS	1206 SWEET GUM DRIVE		3.3 STREET ADDRESS	Perez, Peter Bob Sweet Gung D	rive
CITY - ST-ZIP	BRANDON FL		3.4. CITY-ST-ZIP	Brandon FL 3	
TITLE		☐ DELETE	4.1 TITLE	1	☐ Change ☐ Addition
NAME			4. 2 NAME	· ·	
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY-ST-ZIP		_h
TITLE		DELETE	5.1 TITLE		Chapge Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	4	to Idialyo 1
CITY-ST-ZIP			5.4 CITY-ST-ZIP		1/4/1/17
TITLE		DELETE	6.1 TITLE	//	Change Addition
RAME			6.2 NAME	//	<b>'</b>
STREET ADDRESS	·		6.3 STREET ADDRESS		0 0

CITY-ST-ZIP

14. I do 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.

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