## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(8)

HEATHER LAKES AT BRANDON COMMUNITY ASSOCIATION.

Feb 24 1998 8:00am Secretary of State

**FILED** 

INC.						
Principal Place of Business		Malling Address		T TO BEILINGS ON BURNINGS HOUR HERD CORNE WILL WITH	I BISIN DIBIN DIDIN DIDIN DIDIN FOOT	
C/O UNIVERSIT 824 E FLETCHE TAMPA FL 3361 US	R AVE	C/O UNIVERSITY PROPERTIE 824 E FLETCHER AVE TAMPA FL 33612 US	es .	3. Date Incorporated or Qualified 03/16/1989 4. FEI Number	Applied For	
2 Principal Pi	ace of Business	2a. Mailing Address		59-2949601	Not Applicable	
2. Principal Place of Business 21. C/O University Properties Inc 28. C/O University			Properties, Inc	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc.			•	6. Election Campaign Financing	\$5.00 May Be	
22 7001 Temple Torrace Huy 27 7001 Temple I			elsace Hug	Trust Fund Contribution	Added to Fees	
			<i>face</i>	7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip	Country	8. This corporation owes or has paid the		
24 <i>336</i> .	9. Name and Address of Ourren		10 Hillshorough	Personal Property Tax due June 30.  10. Name and Address of New Register	Yes No	
81 Name						
DUARTE, ANTONIO I 82 Street Address				ress (P.O. Box Number Is Not Acceptable)		
11959 N FLORIDA AVE			52 Street Addi	ess (F.O. BOX Number is Not Acceptable)		
TAMPA F	FL 33612		83			
			84 City		<b>85</b> Zip Code	
					<b>-L</b>	
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 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 applicable (NOTE: Registered Agent signature required when reinstating)    DATE						
12.	OFFICERS ANI		Hagietered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	SIKORSKI, FRED		1.2 NAME		7. 75	
STREET ADDRESS	311 PARK PLACE 5-600		1.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY - ST - ZIP			
TITLE	VPO	☐ DELETE	2.1 TITLE		Change L Addition	
NAME	MILLER, FRANCINE		2.2 NAME		. **	
STREET ADDRESS	311 PARK PLACE 5-800		2.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL SD	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
TITLE NAME	PEREZ, PETER	pecie	3.2 NAME			
STREET ADDRESS	1206 SWEET GUM DRIVE		3.3 STREET ADDRESS		:	
CITY-ST-ZIP	BRANDON FL		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		9 1	
CITY-ST-2IP			4.4 CITY-ST-ZIP		<u> </u>	
TITLE		DELETE	5.1 TITLE		L. Change L. Addition	
NAME			5.2 NAME		<u> </u>	
STREET ADDRESS			5.3 STREET ADDRESS		t i	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Change Ladding	
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME		<b>)</b>	
STREET ADDRESS			6.3 STREET ADDRESS		<i>[</i> ]	
CITY-S1-ZIP	portification information according to	ith this filling does not qualify for	6.4 CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes I furthe	ar certify that the information	
indicated	certify that the information supplied w on this annual report or supplements	an trus ming does not quality for at annual report is true and accu-	rate and that my signatu	Section 119.07(3)(i), Florida Statutes. I furtheure shall have the same legal effect as if mad	e under oath; that I am an	

Indicated on this annual report or supplemental annual report is true and accurate and that my signature small nave the same legal effect 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 Block 12 or Block 13 if changed, or on an attachment with an address.