

FILED
Sep 17, 2001 8:00 am
Secretary of State

08-16-2001 90008 036 ***61.25

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N31225**

1. Entity Name

HEATHER LAKES AT BRANDON COMMUNITY ASSOCIATION,

Principal Place of Business

C/O UNIVERSITY PROPERTIES, INC.
 7001 TEMPLE TERRACE HWY
 TEMPLE TERRACE FL 33637
 US

Mailing Address

C/O UNIVERSITY PROPERTIES, INC.
 7001 TEMPLE TERRACE HWY
 TEMPLE TERRACE FL 33637
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2949601**
☐ Applied For
☐ Not Applicable
5. Certificate of Status Desired ☐
\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUARTE, ANTONIO I
11959 N FLORIDA AVE
TAMPA FL 33612

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN-10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PD
LASHLEY, JAMES
311 PARK PLACE STE 600
CLEARWATER FL 34619

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D
CRUZ, RAY
1901 WIDELAKE CT
BRANDON FL 33511

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VO
THOMPSON, CLAY
311 PARK PLACE STE 600
CLEARWATER FL 34619

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

33759
☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VSD
33759

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D
FLOYD LARRY
311 PARK PLACE STE 600
CLEARWATER, FL

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

12. I 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 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 appropriate empowered.

SIGNATURE:

SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-17-01

Date

727

Daytime Phone #