2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 05, 2001 8:00 am
Secretary of State
03-12-2001 90025 041 ****61.25

DOCUMENT # N51426

1. Entity Name

HECKSCHER DRIVE COMMUNITY CLUB, INC.

Principal Place of Business	Mailing Address
9364 HECKSCHER DR JACKSONVILLE FL 32226	9364 HECKSCHER DR JACKSONVILLE FL 32226

DO NOT WRITE IN THIS SPACE

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 59-6004533 ☐ 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
SAMMONS, JESSIE W 9280 HECKSCHER DR JACKSONVILLE FL 32226	Name Wynn, Wanda Street Address (P.O. Box Number is Not Acceptable) 8872 Heckscher Dr Jacksonville, FL 32226 City / 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 Wanda Wynn — Wanda Wynn — 2/6/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	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	TD ADCOX, BARBARA 8746 MCKENNA DR JACKSONVILLE FL 32226	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WYNN, WANDA 8872 HECKSCHER DR JACKSONVILLE FL 32226	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~President~~ P D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEIGH, GERALDINE 6026 HECKSCHER DR JACKSONVILLE FL 32226	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~1st VP~~ V D Richart, Carolyn 8864 McKenna Dr. Jacksonville, FL 32226	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POWERS, BILLY 6026 RAMOTH DR JACKSONVILLE FL 32226	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~2nd VP~~ V D Garrity, Antionette 6878 Ramoth Dr Jacksonville, FL 32226	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SAMMONS, JESSIE W 9280 HECKSCHER, DRIVE JACKSONVILLE FL 32226	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Secretary~~ SD Altman, Nancy 9759 Heckscher Dr. Jacksonville, FL 32226	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SPRUILL, DAVID 15333 CAPE DR S JACKSONVILLE FL 32226	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 other like empowered.

SIGNATURE: Barbara Adcox SIGNATURE REQUIRED — Barbara Adcox, Treasurer — 2/6/01 — 904/251-3783

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #