

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90372 023 ****61.25

DOCUMENT # N51426

1. Entity Name

HECKSCHER DRIVE COMMUNITY CLUB, INC.



Principal Place of Business

**9364 HECKSCHER DR
JACKSONVILLE FL 32226**

Mailing Address

~~870 772 SAFE HARBOR WAY~~
JACKSONVILLE FL 32226

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9364 Heckscher Dr

Jacksonville, FL

32226

USA

4. FEI Number **59-6004533**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WYNN, WANDA
8872 HECKSCHER DRIVE
JACKSONVILLE FL 32226**

7. Name and Address of New Registered Agent

Name **SAMMONS, JESSIE W.**

Street Address (P.O. Box Number is Not Acceptable)
9280 Heckscher Dr.

City **Jacksonville**

FL

Zip Code
32226

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Jessie W. Sammons, President**

4-10-03

FILE NOW - FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **SEYMOUR, MICHAEL**
STREET ADDRESS **4772 SAFE HARBOR WAY**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

TITLE **VPD** ☒ Delete
NAME **SMITH, ROBBIE**
STREET ADDRESS **4772 SAFE HARBOR WAY**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

TITLE **VPD** ☒ Delete
NAME **KING, LISA**
STREET ADDRESS **9158 HECKSCHER DR.**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

TITLE **VPD** ☒ Delete
NAME **DALY, NIKKI**
STREET ADDRESS **9885 HECKSCHER DR.**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

TITLE **TSO** ☒ Delete
NAME **PIKE, DIANA**
STREET ADDRESS **9209 HECKSCHER DR**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **SAMMONS, JESSIE W.**
STREET ADDRESS **9280 Heckscher Dr.**
CITY-ST-ZIP **JACKSONVILLE, FL 32226**

TITLE **VPD** ☒ Change ☐ Addition
NAME **HOLLAND, Theresa**
STREET ADDRESS **10127 Ft. George Rd.**
CITY-ST-ZIP **JACKSONVILLE, FL 32226**

TITLE **VPD** ☒ Change ☐ Addition
NAME **Altman, Nancy**
STREET ADDRESS **9759 Heckscher Dr.**
CITY-ST-ZIP **JACKSONVILLE, FL 32226**

TITLE **TD** ☒ Change ☐ Addition
NAME **Stewart, M'Liss**
STREET ADDRESS **10020 Heckscher Dr.**
CITY-ST-ZIP **JACKSONVILLE, FL 32226**

TITLE **SD** ☒ Change ☐ Addition
NAME **Wynn, Wanda**
STREET ADDRESS **8872 Heckscher Dr.**
CITY-ST-ZIP **JACKSONVILLE, FL 32226**

TITLE **SAD** ☐ Change ☒ Addition
NAME **Rush, Robert**
STREET ADDRESS **9212 Heckscher Dr.**
CITY-ST-ZIP **JACKSONVILLE FL 32226**

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: **Jessie W. Sammons** **4-10-03** **904-251-3384**

CR2E037 (10/02)