

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 11, 2004 8:00 am**  
**Secretary of State**

02-11-2004 90004 002 \*\*\*\*61.25

**DOCUMENT # N92000000278**

1. Entity Name

**HEATHER HILL VILLAS CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

C/O CALIBER MGT,  
32708 US 19 N.  
PALM HARBOR FL 34684

Mailing Address

C/O CALIBER MGT  
32708 US 19 N.  
PALM HARBOR FL 34684

44003000



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3165877

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**TANKEL, ROBERT L PA**  
**1022 MAIN ST, STE D**  
**DUNEDIN FL 34698**

7. Name and Address of New Registered Agent

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

SIGNATURE

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**  
**Due By May 1, 2004**

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 LOWELL, DEXTER R  
STREET ADDRESS 1065 LOCH HAVEN DR. SOUTH  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ Delete  
NAME MCEWEN, TOM  
STREET ADDRESS 855 OXFORD COURT  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE VPD ☐ Delete  
NAME BROWN, GERRY  
STREET ADDRESS 853 EDEN CT  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☐ Delete  
NAME WILLIAM, MARTIN  
STREET ADDRESS 860 OXFORD COURT  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ Delete  
NAME ZWECK, JACK  
STREET ADDRESS 852 OXFORD COURT  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE TD ☐ Delete  
NAME STACEY, MARION  
STREET ADDRESS 847 CAMBRIDGE CT.  
CITY-ST-ZIP DUNEDIN FL 34698

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition  
NAME LATHERINE HARDIN  
STREET ADDRESS 838 EDEN COURT  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME MCCLURG, ROBERT  
STREET ADDRESS 1071 LOCH HAVEN DR N.  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

*Dexter R Lowell*

DEXTER R. LOWELL, PR 2/5/04

727-734-9557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #