

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000278

FILED
Feb 22, 2012
Secretary of State

Entity Name: HEATHER HILL VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O CALIBER MGT
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695

New Principal Place of Business:

C/O DAVID W. ORMISTON, CPA, PA
800 TARPON WOODS BLVD., F-4
PALM HARBOR, FL 34685

Current Mailing Address:

C/O CALIBER MGT
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695

New Mailing Address:

C/O DAVID W. ORMISTON, CPA, PA
800 TARPON WOODS BLVD., F-4
PALM HARBOR, FL 34685

FEI Number: 59-3165877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, SHIRLEY H
C/O CALIBER MGT
701 ENTERPRISE ROAD E. SUITE 401
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

ORMISTON, DAVID
C/O DAVID W. ORMISTON, CPA, PA
800 TARPON WOODS BLVD., F-4
PALM HARBOR, FL 34685 US

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: DAVID W ORMISTON

02/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD
Name: CASPER, RICHARD
Address: 838 EDEN CT
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: CREAMER, BETTY
Address: 847 EDEN CT.
City-St-Zip: DUNEDIN, FL 34698

Title: VPD
Name: JORDAN, STUART
Address: 1056 LOCH HAVEN DR N
City-St-Zip: DUNEDIN, FL 34698

Title: TD
Name: TSIMBINOS, SPIROS
Address: 857 OXFORD CT
City-St-Zip: DUNEDIN, FL 34698

Title: PD
Name: CAFFEE, GLENNA
Address: 1082 LOCH HAVEN DRIVE S.
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: STEVENS, DANNY
Address: 1057 LOCH HAVEN DRIVE S.
City-St-Zip: DUNEDIN, FL 34698

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GLENNA CAFFEE

PD

02/22/2012

Electronic Signature of Signing Officer or Director

Date