2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N95000005212

1. Entity Name
HILL TOP HERITAGE DEVELOPMENT, INC.

Principal Place of Business
2774 BURROUGHS RD
MIDDLEBURG, FL 32068

Mailing Address
P.O. BOX 1349
MIDDLEBURG, FL 32050

04212008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3353633

Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JACKSON, MAUDE B
2774 BURROUGHS RD
MIDDLEBURG, FL 32068

DO NOT WRITE IN THIS SPACE

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 ______________________________

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D/D
NAME	JACKSON, MAUDE B
STREET ADDRESS	2774 BURROUGHS RD
CITY ST ZIP	MIDDLEBURG, FL 32068
TITLE	VP
NAME	OLIVER, MAMIE
STREET ADDRESS	PO BOX 327, FOREMAN CIR
CITY ST ZIP	MIDDLEBURG, FL 32068
TITLE	S/D
NAME	TUGGLAS, CATHERINE
STREET ADDRESS	PO BOX 344, 2768 BURROUGHS RD
CITY ST ZIP	MIDDLEBURG, FL 32068
TITLE	AS
NAME	DESUE, ANNETT
STREET ADDRESS	2742 BURROUGHS RD
CITY ST ZIP	MIDDLEBURG, FL 32068
TITLE	T
NAME	BOATRIGHT, GLORIA
STREET ADDRESS	2731 FORMAN CIRCLE
CITY ST ZIP	MIDDLEBURG, FL 32068
TITLE	P/D
NAME	STEWART, ROBERT L
STREET ADDRESS	2767 FORMAN CIRCLE
CITY ST ZIP	MIDDLEBURG, FL 32068

U00000920052
05/14/08-80028-016 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Maude B. Jackson Maude B. Jackson 04/21/08 904 282-4168
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR