

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10 1997 8:00am
Secretary of State

DOCUMENT # N96000000606 (1)

1. Corporation Name

HERITAGE VILLAGE HOMEOWNERS
ASSOCIATION CORPORATION OF LARGO

Principal Place of Business

Mailing Address

DORIS FIELD MILLS
12840 SEMINOLE BLVD LOT 21
LARGO FL 33778

2. Principal Place of Business

2a. Mailing Address

21 12840 SEMINOLE BLVD

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 LOT 21

27

City & State

City & State

23 LARGO FL

28

Zip

Country

Zip

Country

24 33778

25

USA

29

30

3. Date Incorporated or Qualified

3a. Date of Last Report

02/05/96

4. FEI Number

Applied For

59-2421877

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILED BY DORIS F MILLS
12840 SEMINOLE BLVD LOT 21
LARGO FL 33778

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT ☐ DELETE

NAME WILLIAM JALLAND

STREET ADDRESS 12840 SEMINOLE BLVD 22G

CITY-ST-ZIP LARGO FL 33778

TITLE VICE PRESIDENT ☐ DELETE

NAME THOMAS MILLS

STREET ADDRESS 12840 SEMINOLE BLVD 21

CITY-ST-ZIP LARGO FL 33778

TITLE SECRETARY ☐ DELETE

NAME PEGGY JALLAND

STREET ADDRESS 12840 SEMINOLE BLVD 22G

CITY-ST-ZIP LARGO FL 33778

TITLE TREASURER ☐ DELETE

NAME ALVIN MUELLER

STREET ADDRESS 12840 SEMINOLE BLVD 43G

CITY-ST-ZIP LARGO FL 33778

TITLE DIRECTOR ☐ DELETE

NAME MARCEL BOUDREAU

STREET ADDRESS 12840 SEMINOLE BLVD 41

CITY-ST-ZIP LARGO FL 33778

TITLE DIRECTOR ☐ DELETE

NAME GINNY WORKMAN

STREET ADDRESS 12840 SEMINOLE BLVD 38

CITY-ST-ZIP LARGO FL 33778

1.1 TITLE DIRECTOR ☐ Change ☐ Addition

1.2 NAME FRANCIOUS ROTHIER

1.3 STREET ADDRESS 12840 SEMINOLE BLVD 42

1.4 CITY-ST-ZIP LARGO FL 33778

2.1 TITLE DIRECTOR ☐ Change ☐ Addition

2.2 NAME WAYNE BLE91

2.3 STREET ADDRESS 12840 SEMINOLE BLVD 19

2.4 CITY-ST-ZIP LARGO FL 33778

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-3-97

3-10-97

CR2E037 (9/96)