NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 05, 1999 8:00 am § Secretary of State

03-05-1999 90125 033 \*\*\*\*61.25

## 1999 POCUMENT # N9600000606

1. Corporation Name

HERITAGE VILLAGE HOMEOWNERS ASSOCIATION CORPORATION OF LARGO						
Principal Place of Business Mailing Address				<del></del>		
12840 SEMINOI LOT 45 LARGO FL 337 US		12840 SEMINOLE BLVD LOT 45 LARGO FL 33778 US				
2. Principal Place of Business 2a. Mailing Address				3. Date Incorporated or Qualifed		
21		26		02/05/1996		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For	
22		27		59-2421877	Not Applicable	
City & Stat	e	City & State	-	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be	
24	25	29 3	0	Trust Fund Contribution	Added to Fees	
	9. Name and Address of Current	t Registered Agent	81 Name _	10. Name and Address of New Registered Agent		
MILLS, DO 12840 SEN LARGO FL	RIS FIELD MINOLE BLVD 80 . 34648-2303		83 84 City L	ALGO	FL 85 Zip Code 33778	
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, Roed or printed perims of registered agent and little if applicable. (NOTE. Registered Agent signature required when reinstating)						
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFIC			
TITLE	P	☐ DELETE	1.1 TITLE	IMPSON, JUNE 2840 SEMINOLE B	Change 🗀 Addition	
NAME	JALLAND, WILLIAM		1.2 NAME 5	IMPSON 3 JUNE &	1UD #76	
STREET ADDRESS	12840 SEMINOLE BLVD 24		1.3 STREET ADDRESS	2840 SEMINOCE D		
CITY-ST-ZIP	LARGO FL 33778		1.4 CITY-ST-ZIP	ARGO FL 337	.78	
TITLE	VP	☐ DELETE	2.1 TITLE	ARGO FL 2337 ATALAND, LEONA, 1840 SEMINALE-BO	19€hange	
NAME	NICHOL, GORDON		2.2 NAME	ATALANO, LEONA	100 # 39 ·	
STREET ADDRESS	12840 SEMINOLE BLVD 82		2.3 STREET ADDRESS /	1840 SEMINALE B.		
CITY-ST-ZIP	LARGO FL 33778		2. 4 CITY-ST-ZIP	ARGO, FL 33778		
TITLE	S	☐ DELETE	3.1 TITLE	•	Change Addition	
NAME	JALLAND, PEGGY		3.2 NAME		]	
STREET ADDRESS	12840 SEMINOLE BLVD 24		3.3 STREET ADDRESS			
CITY-ST-ZIP	LARGO FL 33778		3.4. CITY-ST-ZIP			
TITLE	T	☐ DELETE	4.1 TITLE		Change Addition	
NAME	MUELLER, ALVIN		4. 2 NAME			
STREET ADDRESS	12840 SEMINOLE BLVD 45		4.3 STREET ADDRESS			

CITY-ST-ZIP

14. 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 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

□ DELETE

SIGNATURE: WILLIAM TO THE PRINTED REPORTED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

LARGO FL 33778

**BLESI, WAYNE** 

BLCAK, EDNA

LARGO FL 33778

12840 SEMINOLE BLVD 81

12840 SEMINOLE BLVD 18

CITY-ST-ZIP

STREET ADDRESS

STREET\_ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

FEB 17 1999

727 587.9

☐ Change

☐ Change.

☐ Addition

Addition

R2E037 (11/98)