

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2007 8:00 am
Secretary of State

02-15-2007 90053 017 ****61.25

DOCUMENT # N97000000367

1. Entity Name

HERITAGE OAKS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

ARGUS PROP MGMT., INC.
2477 STICKNEY POINT RD., 118A
SARASOTA FL 34231

Mailing Address

ARGUS PROP MGMT., INC.
2477 STICKNEY POINT RD., 118A
SARASOTA FL 34231



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-0728484

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROSS, DARLENE
2477 STICKNEY POINT RD.,
118A
SARASOTA FL 34231

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, 2007

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 | P | <input checked="" type="checkbox"/> Delete |
| NAME | SCHEUERMANN, LORETTA | |
| STREET ADDRESS | 4568 CHASE OAKS DR | |
| CITY - ST - ZIP | SARASOTA FL 34241 | |
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | SPINDLER, LARRY | |
| STREET ADDRESS | 4508 CHASE OAKS DR | |
| CITY - ST - ZIP | SARASOTA FL 34241 | |
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | WHALEN, FRANK | |
| STREET ADDRESS | 4514 CHASE OAKS DR | |
| CITY - ST - ZIP | SARASOTA FL 34241 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | STIEFELMEYER, GEORGE | |
| STREET ADDRESS | 4683 CHASE OAKS DR | |
| CITY - ST - ZIP | SARASOTA FL 34241 | |
| TITLE | AS | <input type="checkbox"/> Delete |
| NAME | CROSS, DARLENE | |
| STREET ADDRESS | 2477 STICKNEY PARK RD., SUITE 118A | |
| CITY - ST - ZIP | SARASOTA FL 34241 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|-----------------|-----------------------|--|
| TITLE | Alice Sprandel | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | 4490 Chase Oaks Drive | |
| STREET ADDRESS | Sarasota FL 34241 | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Darlene Cross
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/07

941 927-6464

Date

Daytime Phone #