## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # N97000003579 (6)

HERITAGE OAKS II HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address 337 INTERSTATE BLVD. 337 INTERSTATE BLVD 3. Date Incorporated or Qualified SARASOTA FL 34240 SARASOTA FL 34240 06/20/1997 4. FEI Number Applied For 65-0769202 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 ☑ Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SWALM & MURRELL, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 2375 TAMIAMI TRAIL N. STE. 308 83 NAPLES FL 34103 City 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Addition Change Kerber, Todd DANNA, CHARLES NAME 1.2 NAME 337 INTERSTATE BLVD. 337 INTERSTATE BLVD. STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP SARASOTA FL 34240 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Addition Change NAME ALLEGRA, ROBERT T 2.2 NAME STREET ADDRESS 337 INTERSTATE BLVD. 2.3 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34240 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition CHAMBERS, CONNOR NAME 3.2 NAME STREET ADDRESS 337 INTERSTATE BLVD. 3.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.5 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE TITLE Addition 6.1 TITLE ☐ Change NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

SIGNATURE:

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 of trustee impowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 617, in a state of the corporation of the corporation of the corporation or the receiver of trustee in Block 12 or Block 13 if chapter 617, Florida Statutes. duky

FILED

Mar 02 1998 8:00am

Secretary of State