

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

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90014 002 ****61.25

DOCUMENT # N98000004101

1. Entity Name

VERANDA III AT HERITAGE OAKS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

ARGUS PROPERTY MGMT INC
2477 STICKNEY POINT RD 118A
SARASOTA FL 34231

ARGUS PROPERTY 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

65-0855270

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
STE 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 reappointing)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: P ☒ Delete
NAME: WASHTOCK, ROBERT
STREET ADDRESS: 5291 MAHOGANY RUN AVE #921
CITY-STATE-ZIP: SARASOTA FL 34241

TITLE: ☐ Change ☒ Addition
NAME: Richard Shaw
STREET ADDRESS: 5301 Mahogany Run Ave #1024
CITY-STATE-ZIP: Sarasota FL 34241

TITLE: VP ☐ Delete
NAME: RINEHART, DONALD
STREET ADDRESS: 5281 MAHOGANY RUN AVE #822
CITY-STATE-ZIP: SARASOTA FL 34241

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: VP ☐ Delete
NAME: PERSON, ROLAND
STREET ADDRESS: 5301 MAHOGANY RUN AVE #1016
CITY-STATE-ZIP: SARASOTA FL 34241

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: AS ☐ Delete
NAME: CROSS, DARLENE
STREET ADDRESS: 2477 STICKNEY POINT RD 118A
CITY-STATE-ZIP: SARASOTA FL 34231

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-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 **DARLENE CROSS**

2/9/07

941-927-6464

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #