2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# N98000004621

Entity Name: GREEN LEAF VILLAGE OF HERITAGE SPRINGS, INC.

Current Principal Place of Business:

11345 ROBT TRENT JONES PARKWAY
NEW PORT RICHEY, FL 34665 US

New Principal Place of Business:

Current Mailing Address:

11345 ROBT TRENT JONES PARKWAY
NEW PORT RICHEY, FL 34665 US

New Mailing Address:

FEI Number: 59-3573375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KARACH, MITCHELL P GEN MGR
HERITAGE SPRINGS COMM ASSM INC.
11345 ROBERT TRENT JONES PARKWAY
NEW PORT RICHEY, FL 34655

Name and Address of New Registered Agent:

KRACH, MITCHELL P GEN MGR
HERITAGE SPRINGS COMM ASSM INC.
11345 ROBERT TRENT JONES PARKWAY
NEW PORT RICHEY, FL 34655

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.

SIGNATURE: MITCHELL KRACH 05/01/2003
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: BARBER, NORMAN
Address: 11345 ROBERT TRENT JONES PKWY
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DST ( ) Delete
Name: LUKASZEWSKI, JOHN J
Address: 11345 ROBT TRENT JONES PARKWAY
City-St-Zip: NEW PORT RICHEY, FL 34665

Title: DP ( ) Delete
Name: EICHHOLT, LEWIS
Address: 11345 ROBT TRENT JONES PARKWAY
City-St-Zip: NEW PORT RICHEY, FL 34665

Title: VPO ( ) Delete
Name: KRACH, MITCHELL
Address: 11345 ROBT TRENT JONES PARKWAY
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: RAYNARD, FLOYD
Address: 11345 ROBERT TRENT JONES PKWY
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DS (X) Change ( ) Addition
Name: HARRINGTON, ED
Address: 11345 ROBT TRENT JONES PARKWAY
City-St-Zip: NEW PORT RICHEY, FL 34665

Title: DT (X) Change ( ) Addition
Name: DWYER, JOAN
Address: 11345 ROBT TRENT JONES PARKWAY
City-St-Zip: NEW PORT RICHEY, FL 34665

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MITCHELL KRACH VP 05/01/2003
Electronic Signature of Signing Officer or Director Date