

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004624

FILED
Jan 23, 2009
Secretary of State

Entity Name: CLUBHOUSE VILLAGE OF HERITAGE SPRINGS, INC.

Current Principal Place of Business:

1335 HICKORY MOSS PL
TRINITY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

1335 HICKORY MOSS PL
TRINITY, FL 34655 US

New Mailing Address:

FEI Number: 59-3573374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEENICK, JOHN
1335 HICKORY MOSS PL
TRINITY, FL 34655 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: FEENICK, JOHN
Address: 1335 HICKORY MASS PLACE
City-St-Zip: TRINITY, FL 34655

Title: S () Delete
Name: HALL, DICK
Address: 1332 HICKORY MASS PLACE
City-St-Zip: TRINITY, FL 34655

Title: P () Delete
Name: ABoulLEMAN, DONALD
Address: 1432 HICKORY MASS PLACE
City-St-Zip: TRINITY, FL 34655

Title: D () Delete
Name: LIBERTY, ROGER
Address: 1404 HICKORY MOSS PLACE
City-St-Zip: TRINITY, FL 34655

Title: D () Delete
Name: MEYER, ROSE
Address: 1361 HICKORY MOSS PLACE
City-St-Zip: TRINITY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN J. FEENICK

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01/23/2009

Electronic Signature of Signing Officer or Director

Date