## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N98000004625

City-St-Zip:

NEW PORT RICHEY, FL 34655

Entity Name: FAIRWAY VILLAGE OF HERITAGE SPRINGS, INC.

FILED May 08, 2002 8:00 AM Secretary of State

Current Pi	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
	BT TRENT JO T RICHEY, FL						
Current M	ailing Addres	ss:	New Maili	New Mailing Address:			
	BT TRENT JO T RICHEY, FL						
FEI Number:	59-3579486	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )		
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:		
HERITÁGE 11345 ROE		DMM, ASSN. INC. JONES PKWY	HERITÄGE 11345 ROE	KRACH, MITCHELL P GM HERITAGE SPRINGS COMM, ASSN. INC. 11345 ROBERT TRENT JONES PKWY NEW PORT RICHEY, FL 34655			
The above in the State		submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both	١,	
SIGNATUR	RE: MITCHEL	L KRACH		05/08/2002			
	Electror	nic Signature of Registered Age	nt		Date	-	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BARBER, NOR 11345 ROBT T	Delete MAN RENT JONES PKWY CHEY, FL 34655	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	ZEWSKI, JOHN 11345 ROBT T	Delete I J RENT JONES PKWY CHEY, FL 34665	Title: Name: Address: City-St-Zip:	LUKASZEWSI 11345 ROBT	K) Change()Addition KI, JOHN J FRENT JONES PKWY ICHEY, FL 34665		
Title: Name: Address: City-St-Zip:	EICHHOLT, LE	Delete WIS TTRENT JONES PKWY CHEY, FL 34655	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address:	KRACH, MITCH	) Delete IELL TTRENT JONES PKWY	Title: Name: Address:	(	) Change ( ) Addition		

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.

City-St-Zip:

SIGNATURE: MITCHELL KRACH VP 05/08/2002