

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90111 015 ***150.00

DOCUMENT # P00000085038

1. Entity Name
HERITAGE OAKS DEVELOPMENT COMPANY



Principal Place of Business

~~0115 DIXIE HIGHWAY, N.E.~~
~~PALM BAY FL 32905~~

Mailing Address

~~3115 DIXIE HIGHWAY, N.E.~~
~~PALM BAY FL 32905~~

2. Principal Place of Business

300 E. New Haven Ave.

Suite, Apt. #, etc.

3. Mailing Address

300 E. New Haven Ave.

Suite, Apt. #, etc.

City & State

Melbourne FL

City & State

Melbourne, FL

4. FEI Number

59-3669459

Applied For
Not Applicable

Zip

32901

Country

USA

Zip

32901

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PENCE, ROY J

~~3115 DIXIE HIGHWAY, N.E.~~

~~PALM BAY FL 32905~~

7. Name and Address of New Registered Agent

Name

same

Street Address (P.O. Box Number is Not Acceptable)

300 E New Haven Ave.

City

Melbourne

FL

Zip Code

32901

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 reinstating)

DATE

1/16/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME PENCE, ROY J
STREET ADDRESS 3115 DIXIE HIGHWAY, N.E.
CITY-ST-ZIP PALM BAY FL 32905

TITLE PST ☐ Delete
NAME PENCE, ROY J
STREET ADDRESS 3115 DIXIE HWY NE
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 300 E. New Haven Ave
CITY-ST-ZIP Melbourne, FL 32901

TITLE ☐ Change ☐ Addition
NAME Same
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 607, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/16/03

CR2E034 (10/02)