


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000130672 1. Entity Name HERITAGE LAKE REALTY, INC.	
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Principal Place of Business 26212 MADRAS CT. CHARLOTTE HARBOR, FL 33983	Mailing Address 26212 MADRAS CT. CHARLOTTE HARBOR, FL 33983
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04242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0558942	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SEIDER, WILLIAM M 200 SOUTH ORANGE AVE. SARASOTA, FL 34236
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**DO NOT WRITE
IN THIS SPACE**

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 reissuing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD PALMER, PHILIP J 26212 MADRAS CT. CHARLOTTE HARBOR, FL 33983
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MORRIS, ROBERT A JR. 1990 LANDINGS BLVD. SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V JOHNSTON, ANDREW 26212 MADRAS CT. PUNTA GORDA, FL 33983
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/28/08-80096-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Philip Palmer 4/25/08 941-766-8315
Date Daytime Phone #