

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90111 032 ***158.75

DOCUMENT # P98000057195

1. Entity Name
HERITAGE FAIRMONT HILLS, INC.



Principal Place of Business
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931

Mailing Address
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931

40109669



2. Principal Place of Business - No P.O. Box #
5505 N ATLANTIC AVE

3. Mailing Address
5505 N ATLANTIC AVE

Suite, Apt. #, etc.
#108

Suite, Apt. #, etc.
#108

04122007 Chg-P CR2E034 (12/06)

City & State
COCOA BEACH, FL

City & State
COCOA BEACH, FL

4. FEI Number
59-3518520

Applied For
Not Applicable

Zip
32931

Country
US

Zip
32931

Country
US

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCPHILLIPS, JACQUELINE
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931

7. Name and Address of New Registered Agent

Name
KINCAID JAMES

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

5505 N ATLANTIC AVE; #108

City
COCOA BEACH

FL

Zip Code
32931

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 James Kincaid, James Kincaid, VP
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reconstituting)

4/26/07
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
DPST
MCPHILLIPS, MICHAEL
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DV
MCPHILLIPS, JACQUELINE
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DV
KINCAID, JAMES
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DC
HARDING, NEAL
5505 N ATLANTIC AVE #115
COCOA BEACH, FL 32931 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPST
5505 N ATLANTIC AVE; #108 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
5505 N ATLANTIC AVE; #108 ☒ Change ☐ Addition

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

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

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: James Kincaid James Kincaid 4/26/07 321-799-4090
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #