

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Apr 30, 2024**

**Secretary of State  
3728798536CC**

DOCUMENT# N00000001432

**Entity Name:** HERITAGE HARBOUR MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

5540 STATE ROAD 64 EAST  
SUITE 220  
BRADENTON, FL 34208

**Current Mailing Address:**

4654 STATE ROAD 64 EAST  
SUITE 503  
BRADENTON, FL 34208 US

**FEI Number:** 59-3634229

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ICON MANAGEMENT SERVICES FLORIDA, LLC  
5540 STATE ROAD 64 EAST  
SUITE 220  
BRADENTON, FL 34208 US

*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:** TESA LEAL

04/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name STEFANOSKI, ALEKSANDAR  
Address 7070 CHATUM LIGHT RUN  
City-State-Zip: BRADENTON FL 34212

Title PRESIDENT  
Name BRANTLEY, CHRISTINA  
Address 9052 WILLOWBROOK CIRCLE  
City-State-Zip: BRADENTON FL 34212

Title TREASURER  
Name ALBRECHT, MARK  
Address 132 NEW BRITON COURT  
City-State-Zip: BRADENTON FL 34212

Title SECRETARY  
Name GOGARTY, CHRISTOPHER  
Address 110 WINDING RIVER TRAIL  
City-State-Zip: BRADENTON FL 34212

Title DIRECTOR  
Name EDGEWORTH, WILLIAM  
Address 211 RED FOX COURT  
City-State-Zip: BRADENTON FL 34212

Title DIRECTOR  
Name BRODIE, KAREN  
Address 227 CAPE HARBOUR LOOP  
City-State-Zip: BRADENTON FL 34212

Title DIRECTOR  
Name LEVINE, DARRYL  
Address 7133 QUIET CREEK DRIVE  
City-State-Zip: BRADENTON FL 34212

Title DIRECTOR  
Name GODLEWSKI, MARK  
Address 7121 RIVER HAMMOCK DRIVE  
City-State-Zip: BRADENTON FL 34212

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** TESA LEAL

OTHER

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name POWELL, JERRY  
Address 7212 KETCH PLACE  
City-State-Zip: BRADENTON FL 34212

Title DIRECTOR  
Name JACKSON, HEATHER  
Address 6510 ANCHOR LOOP  
City-State-Zip: BRADENTON FL 34212

Title OTHER  
Name LEAL, TESA  
Address 5540 FL-64  
200  
City-State-Zip: BRADENTON FL 34208