

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11725

Entity Name: HEATHER RIDGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O FREEDOM COMMUNITY MANAGEMENT
751 OAK STREET SUITE 110
JACKSONVILLE, FL 32204

Current Mailing Address:

C/O FREEDOM COMMUNITY MANAGEMENT
751 OAK STREET SUITE 110
JACKSONVILLE, FL 32204 US

FEI Number: 59-2501759

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREEDOM COMMUNITY MANAGEMENT
C/O FREEDOM COMMUNITY MANAGEMENT
751 OAK STREET SUITE 110
JACKSONVILLE, FL 32204 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: TERI L. GORMLEY

02/12/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KINSALL, TERESA
Address C/O FREEDOM COMMUNITY
 MANAGEMENT
 751 OAK STREET SUITE 110
City-State-Zip: JACKSONVILLE FL 32204

Title VP
Name WEST, DEAN
Address C/O FREEDOM COMMUNITY
 MANAGEMENT
 751 OAK STREET SUITE 110
City-State-Zip: JACKSONVILLE FL 32204

Title SECRETARY
Name WORLEY, ANGELA
Address C/O FREEDOM COMMUNITY
 MANAGEMENT
 751 OAK STREET SUITE 110
City-State-Zip: JACKSONVILLE FL 32204

Title TREASURER
Name FRIER, MICHELLE
Address C/O FREEDOM COMMUNITY
 MANAGEMENT
 751 OAK STREET SUITE 110
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name BARRETO, MICHELLE
Address C/O FREEDOM COMMUNITY
 MANAGEMENT
 751 OAK STREET SUITE 110
City-State-Zip: JACKSONVILLE FL 32204

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: TERESA KINSALL

PRESIDENT

02/12/2025

Electronic Signature of Signing Officer/Director Detail

Date