

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002167

Entity Name: LAKESIDE VILLAGE OF HERITAGE SPRINGS, INC.

Current Principal Place of Business:

1037 ASHBOURNE CIR
NEW PORT RICHEY, FL 34655

Current Mailing Address:

1037 ASHBOURNE CIR
NEW PORT RICHEY, FL 34655

FEI Number: 59-3610213

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BABUREK, JAN
1037 ASHBOURNE CIR
NEW PORT RICHEY, FL 34655 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SCHUMER, JUDITH
Address 1013 ASHBOURNE CIR
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR, TREASURER
Name BABUREK, JANET
Address 1037 ASHBOURNE CIR
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR, SECRETARY
Name TERRACE, ADRIENNE
Address 1041 ASHBOURNE CIR
City-State-Zip: TRINITY FL 34655

Title DIRECTOR
Name DIFILIPPO, VINCENT
Address 1040 ASHBOURNE CIR
City-State-Zip: TRINITY FL 34655

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: JANET A BABUREK

DIRECTOR, TREASURER 02/25/2014

Electronic Signature of Signing Officer/Director Detail

Date