2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2012
Secretary of State

DOCUMENT# 723110

Entity Name: THE FORE-PLEX ASSOCIATION, INC.

Current Principal Place of Business:

2515 LOWSON BLVD
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

C/0 VICTORY ACCOUNTING SERVICE, INC.
P. O. BOX 243214
BOYNTON BEACH, FL 33424 US

New Mailing Address:

FEI Number: 65-0828709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VICTORY ACCOUNTING SERVICES, INC
1500 GATEWAY BLVD
SUITE 220
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: PERRY, SHARON
Address: 125 HILLCREST ROAD
City-St-Zip: WALTHAM, MA 02451 US

Title: T
Name: MITCHELL, STEPHEN T
Address: 2605 LOWSON BLVD APT # D
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: S
Name: ROSENZWEIG, RONI S
Address: 2605 LOWSON BLVD APT # B
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D
Name: LOCIGNO, MIKE D
Address: 2717 LOWSON BLVD APT # A
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D
Name: TASKA, BARBARA D
Address: 579 SW ROMORA BAY
City-St-Zip: ST LUCIE WEST, FL 34981

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: STEPHEN MITCHELL T 03/30/2012

Electronic Signature of Signing Officer or Director Date