FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

700 STARKEY ROAD LARGO FL 34641 729781

(5)

Mailing Address

700 STARKEY ROAD LARGO FL 34641

FORESTBROOK I ASSOCIATION, INC.

FILED Jan 16 1998 8:00am Secretary of State

Applied For

Not Applicable

 Date incorporated or Qualified 04/22/1974

59-1763274

4. FEI Number

2. Principal P	2. Principal Place of Business 2a. Mailing Address				5 Contificate of Status Decired S8.75 Additional	
21	26				5. Certificate of Status Desired 5. Fee Required	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be	
22	27				Trust Fund Contribution	
City & State City & State					7. Is this nonprofit corporation a homeowners association?	
23 28					Yes □ No	
Zip Country Zip Con			Country	,	8. This corporation owes or has paid the current year Intangible	
24 <i>3377</i> / 25 29 <i>3377</i> / 30			0		Personal Property Tax due June 30. Yes 💆 No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
				81 Name		
EKBERG, RONALD E.				82 Street Address (P.O. Box Number is Not Acceptable)		
700 STARKEY RD.						
FORESTBROOK #923			83			
LARGO FL 34641			84	City	85 Zlp Code	
			[04	City	FL 85 Zlp Code 3 3 7 7 /	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	DELETE	1.1 TITLE		Change Addition	
NAME	Manuel, Wilbur O.		1.2 NAME			
STREET ADORESS	700 STARKEY RD UNIT 414		1.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO, FL 00000		1.4 CITY - ST-ZIP			
TITLE	PD	☐ DELETE	2.1 TITLE		Change Additio	
NAME	EKBERG, RONALD E.		2.2 NAME			
STREET ADDRESS	700 STARKEY RD #923		2.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL		2. 4 CITY-S	ST- ZIP		
TITLE	SD	DELETE	3.1 TITLE		Change Additio	
NAME	KEENER, DOROTHY		3.2 NAME			
STREET ADDRESS	700 STARKEY RD UNIT 631		3.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO, FL 00000	SO, FL 00000 3.4.0		IT-ZIP	where the state of	
TITLE	VPD	DELETE	4.1 TITLE		Change Additio	
NAME	JULIEN, H. PAUL		4, 2 NAME	•		
STREET ADDRESS	700 STARKEY RD. #822		4,3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO, FL 00000		4.4 CITY-S		A Annual Company of the Company of t	
TITLE	D	DELETE	S.1 TITLE		Change Addition	
NAME	SELLS, GAY N.		5,2 NAME			
STREET ADDRESS	700 STARKEY RD. #711		5.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL		5,4 CITY-S	l l		
TITLE		DELETE	6,1 TITLE	,	Change Addition	
NAME.		_ ·	6.2 NAME		_ • • _ · ·	
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST			
	ertify that the information supplied with	this filling does not qualify for t			ection 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated	on this annual report or supplemental a	ennual report is true and accura	ate and the	t my signature	shall have the same legal effect as if made under path; that I am an	

anicated on this annual report or supplemental annual report is use and accurate and that my signature shall have the same legal effect as it 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>/- 6-98</u>

8/3-586 4885