

DOCUMENT # 748972

1. Entity Name

FOREST PARK III PROPERTY OWNERS' ASSOCIATION, IN

Principal Place of Business

Mailing Address

PO BOX 602
ARCHER FL 32618
US

P.O. BOX 602
ARCHER FL 32618-0602
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2087158

Applied For

Not Applicable

5. Certificate of Status Desired ☐ ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TORRES, TERRY
11350 NW 123RD PLACE
~~12651 N.W. 108 TERR~~
ARCHER FL 32618

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME RICHTER, DAVID G
STREET ADDRESS 11450 NW 111TH AVE
CITY-ST-ZIP ARCHER FL 32618

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME SHARPE, DIANA
STREET ADDRESS 12790 NW 107TH AVE
CITY-ST-ZIP ARCHER FL 32618

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME TORRES, TERRY
STREET ADDRESS 11350 NE 123RD PLACE
CITY-ST-ZIP ARCHER FL

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 32618

TITLE VD ☒ Delete
NAME CHASE, EDWARD A
STREET ADDRESS 11890 NE 111TH AVE
CITY-ST-ZIP ARCHER FL 32618

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JENKINS, DRU
STREET ADDRESS 12550 NE 101ST CT
CITY-ST-ZIP ARCHER FL 32618

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Change ☒ Addition
NAME Mackay, Edward
STREET ADDRESS 11950 NE 111th Ave
CITY-ST-ZIP Archer, FL 32618

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90085 017 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)