

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002735

FILED
Apr 19, 2012
Secretary of State

Entity Name: FOREST RIDGE TRAILS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

350 SE 116 TERRACE
WILLISTON, FL 32696

New Principal Place of Business:

11351 SE 12TH LANE
MORRISTON, FL 32668

Current Mailing Address:

PO BOX 218
MORRISTON, FL 32668

New Mailing Address:

FEI Number: 59-3641719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMENTS, DENIESE
350 SE 116 TERRACE
WILLISTON, FL 32696 US

Name and Address of New Registered Agent:

DOCKTER, CATHERINE
11351 SE 12TH LANE
MORRISTON, FL 32668 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: CATHERINE A. DOCKTER

04/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: DOCKTER, CATHERINE
Address: 11351 SE 12TH LANE
City-St-Zip: MORRISTON, FL 32668

Title: VPD
Name: EDWARDS, CLAUDE
Address: 14612 HAMLIN BLVD
City-St-Zip: LOXAHATCHEE, FL 33470

Title: SD
Name: SHEPARD, ALISON
Address: 33 LAKESHORE DR
City-St-Zip: PALM HARBOR, FL 34684

Title: TD
Name: ARNOW, JOHN
Address: 851 SE 116TH TERRACE
City-St-Zip: WILLISTON, FL 32696

Title: VPD
Name: HAMILTON, DONNA
Address: P.O. BOX 1027
City-St-Zip: WILLISTON, FL 32696

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: CATHERINE A. DOCKTER

PD

04/19/2012

Electronic Signature of Signing Officer or Director

Date