

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90060 024 ****61.25

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DOCUMENT # N04636

1. Corporation Name

THE VILLAS OF FOREST PARK CONDOMINIUM ASSOCIATIO
N OF DUNEDIN, INC.

Principal Place of Business

2430 ESTANCIA BLVD
SUITE 114
CLEARWATER FL 34621
US

Mailing Address

2430 ESTANCIA BLVD
SUITE 114
CLEARWATER FL 34621
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

08/09/1984

4. FEI Number

59-6829494

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FLORIDA CENTRAL MANAGEMENT INC
2430 ESTANCIA BLVD
SUITE 114
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 DIRECTORS ☐ DELETE

TITLE S
NAME BIGGERS, JOYCE
STREET ADDRESS 1550 REBECCA LN
CITY-ST-ZIP DUNEDIN FL 34698

TITLE TD
NAME CAPASSO, MARGE
STREET ADDRESS 1550 REBECCA LN
CITY-ST-ZIP DUNEDIN FL 34698

TITLE VD
NAME RIPPIN, BETTY
STREET ADDRESS 2307 BEVERLY DR
CITY-ST-ZIP DUNEDIN FL 34698

TITLE VD
NAME OLIVER, VIRGIL
STREET ADDRESS 1532 LYNDIA LN
CITY-ST-ZIP DUNEDIN FL 34698

TITLE PD
NAME MILLER, DENNIS
STREET ADDRESS 2349 BEVERLY DR
CITY-ST-ZIP DUNEDIN FL 34698

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

TD
MARGE CAPASSO
1539 Rebecca Lane
Dunedin, FL 34698

PD
DENNIS MUELLER
2349 Beverly Drive
Dunedin, FL 34698

14. 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 annual report or supplemental annual 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 12 or Block 13 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 #

CR2E037-11/98