

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90240 015 \*\*\*\*61.25

**DOCUMENT # N15197**

1. Entity Name

**FOREST CLUB HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

JOHNNIE B. BYRD, JR.  
 121 N. COLLINS ST.  
 PLANT CITY FL 33564

Mailing Address

JOHNNIE B. BYRD, JR.  
 121 N. COLLINS ST.  
 PLANT CITY FL 33564

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-2679302**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNNIE B. BYRD JR.  
 121 N. COLLINS STREET  
 PLANT CITY FL 33564

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**

**After September 13, 2000 min. will be \$236.25**

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	<input checked="" type="checkbox"/> Delete
NAME	GRAHAM, DON	
STREET ADDRESS	3908 PINE CLUB	
CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HINES, COLIN	
STREET ADDRESS	2704 FOREST CLUB DR	
CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ROSENBLATT, JEFF	
STREET ADDRESS	2701 PINE CLUB DR	
CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KRENTZ, DOUG	
STREET ADDRESS	2907 FOREST CLUB DR	
CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Addition
NAME	Al Rider	
STREET ADDRESS	2901 Forest Club	
CITY-ST-ZIP	Plant City, FL 33567	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Colin Hines	
STREET ADDRESS	2704 Forest Club dr.	
CITY-ST-ZIP	Plant City, FL 33567	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeff Rosenblatt	
STREET ADDRESS	2701 Pine Club	
CITY-ST-ZIP	Plant City, FL 33567	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tom Berry	
STREET ADDRESS	2803 Forest Club Dr	
CITY-ST-ZIP	Plant City, FL 33567	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ed Wilson	
STREET ADDRESS	2910 Pine Club	
CITY-ST-ZIP	Plant City, FL 33567	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jack Brennan	
STREET ADDRESS	3019 Forest Club Dr.	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John Kitchens	
STREET ADDRESS	2809 Pine Club	
CITY-ST-ZIP	Plant City, FL 33567	

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 empowerment.

SIGNATURE:

*Signature*  
**SIGNATURE REQUIRED**  
 Colin F. Hines  
 President

Date

9/6/00

Daytime Phone #

813-289-8788

CR2E037 (5/00)

attachment  
1/15/97  
A077032

OFFICE OF  
**TRINKLE, REDMAN, SWANSON, BYRD & COTON, P. A.**  
ATTORNEYS AT LAW

121 NORTH COLLINS STREET 33566  
P. O. BOX TT  
PLANT CITY, FLORIDA 33564-9040

JOHN R. TRINKLE (1901-1969)

JOHNNIE B. BYRD, JR.

DANIEL M. COTON

JAMES L. REDMAN

CONRAD SWANSON

ROBERT S. TRINKLE

JAMES C. DAVIS, II

TELEPHONE (813) 752-6133

TELECOPIER (813) 754-8957

September 7, 2000

Division of Corporations  
Uniform Business Report Filings  
409 East Gaines Street  
Tallahassee, FL 32399

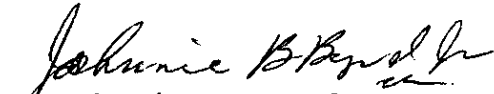
Re: Forest Club Homeowners Association, Inc.

Gentlemen:

I am enclosing 2000 Uniform Business Report of the above corporation, together with our firm's check in the amount of \$61.25 representing filing fee.

Thank you.

Very truly yours,

  
Johnnie B. Byrd, Jr.

JBBJR/eb  
enclosures  
FEDERAL EXPRESS