

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N19949 (9)					
1. Corporation Name THE FOREST VILLAS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business C/O MARQUIS MANAGEMENT INC. 12661 NEW BRITTANY BLVD. FT. MYERS FL 33907 US			Mailing Address C/O MARQUIS MANAGEMENT INC. 12661 NEW BRITTANY BLVD. FT. MYERS FL 33907 US		
3. Date Incorporated or Qualified 04/02/1987			4. FEI Number 65-0027166		



c/o Marquis Management, Inc.
9400 Gladiolus Drive #100
Fort Myers, FL 33908 US

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Fort Myers, FL 33908 US

Certificate of Status Desired	☐	\$8.75 Additional Fee Required
Election Campaign Financing	☐	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐	
Is this nonprofit corporation a homeowners association?		
☐ Yes ☐ No		
This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
☐ Yes ☐ No		

24	25	29	30
9. Name and Address of Current Registered Agent			
STIPHEN, PETER MARQUIS MANAGEMENT INC. 12661 NEW BRITTANY BLVD. FT. MYERS FL 33907			
10. Name and Address of New Registered Agent			
81 Stilphen, Peter			
82 Marquis Management, Inc.			
83 9400 Gladiolus Drive #100			
84 Fort Myers, FL 33908 US			
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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P/D	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition		
NAME	HAMLIN, DOROTHY		1.2 NAME	HAURI, JOHN			
STREET ADDRESS	16938 VILLAS SQ.		1.3 STREET ADDRESS	0191 FOREST VILLAS CIR			
CITY-ST-ZIP	FT. MYERS FL 33908		1.4 CITY-ST-ZIP	FT MYERS, FL 33908			
TITLE	TD	☒ DELETE	2.1 TITLE	VPD	☐ Change ☒ Addition		
NAME	DURHAM, ROBERT		2.2 NAME	CORNELL, JODY			
STREET ADDRESS	6113 FOREST VILLAS CIR		2.3 STREET ADDRESS	0123 FOREST VILLAS CIR			
CITY-ST-ZIP	FT. MYERS FL		2.4 CITY-ST-ZIP	FT MYERS FL 33908			
TITLE	VPD	☒ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition		
NAME	KELLEY, FRANCIS J		3.2 NAME	LONERGAN, ED			
STREET ADDRESS	6093 FOREST VILLAS CIR.		3.3 STREET ADDRESS	0013 FOREST VILLAS CIR			
CITY-ST-ZIP	FT. MYERS FL		3.4 CITY-ST-ZIP	FT MYERS FL 33908			
TITLE	SD	☒ DELETE	4.1 TITLE	SD	☐ Change ☒ Addition		
NAME	KLOTXBASH, JANE		4.2 NAME	LARSEN, KEN			
STREET ADDRESS	6023 FOREST VILLAS CIR.		4.3 STREET ADDRESS	0091 FOREST VILLAS CIR			
CITY-ST-ZIP	FT. MYERS FL		4.4 CITY-ST-ZIP	FT MYERS FL 33908			
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME	STONE, EDWIN		5.2 NAME				
STREET ADDRESS	6081 FOREST VILLAS CIR.		5.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYERS FL		5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/97)