

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 19, 2012  
Secretary of State**

DOCUMENT# N32375

**Entity Name:** FOREST RIDGE HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683 US**New Principal Place of Business:**2706 ALT. 19 NORTH  
SUITE 240 A  
PALM HARBOR, FL 34683 US**Current Mailing Address:**2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683 US**New Mailing Address:**2706 ALT. 19 NORTH  
SUITE 240 A  
PALM HARBOR, FL 34683 US**FEI Number:** 59-3112512**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PMS MANAGEMENT SERVICES, INC.  
2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683 US**Name and Address of New Registered Agent:**MONARCH ASSOCIATION MANAGEMENT, INC.  
2706 ALT. 19 NORTH  
SUITE 240 A  
PALM HARBOR, FL 34683 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: M. SUSAN MARINO

07/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: P  
Name: LACHAR, ROBERT  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR, FL 34683 USTitle: T/VP  
Name: NOLET, RICHARD  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR, FL 34683 USTitle: D  
Name: BELL, DEAN  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR, FL 34683 USTitle: S  
Name: PASEK, PHILLIP  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR,, FL 34683 USTitle: D  
Name: CRISP, JARED  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR, FL 34683 USTitle: D  
Name: KASPARIAN, CONNIE  
Address: 2706 ALT 19 NORTH, SUITE 240 A  
City-St-Zip: PALM HARBOR, FL 34683 US

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: ROBERT LACHAR

P

07/19/2012

Electronic Signature of Signing Officer or Director

Date