


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000000853 (2)
 1. Corporation Name
VILLAGE GREEN OF FOREST LAKES CONDOMINIUM, SECTI ON 12, ASSOCIATION, INC.



Principal Place of Business 2100 CONSTITUTION BLVD. C/O ARGUS PROPERTY MGT INC SARASOTA FL 34231 US	Mailing Address 2100 CONSTITUTION BLVD. C/O ARGUS PROPERTY MGT. INC. SARASOTA FL 34231 US
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3. Date Incorporated or Qualified 03/08/1993		
4. FEI Number 59-2110237	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
**HAMMERLING, WALTER E
 2100 CONSTITUTION BLVD.
 C/O ARGUS PROPERTY MGMT. INC.
 SARASOTA FL 34231**

10. Name and Address of New Registered Agent

81 Name		
82 Street Address (P.O. Box Number is Not Acceptable)		
83		
84 City	85 FL	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS HOBSON JAM	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1520 STAFFORD LA	1.2 NAME	HOBSON, JOHN (speaking)
STREET ADDRESS	SARASOTA FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D COOK, BETTY	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1544 STAFFORD LN	2.2 NAME	
STREET ADDRESS	SARASOTA FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DV DEROSE, LYDIA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1638 STAFFORD LN.	3.2 NAME	
STREET ADDRESS	SARASOTA FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DT ALLGOOD MILDRED	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3614 COLLINS ST.	4.2 NAME	
STREET ADDRESS	SARASOTA FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DP KOHLER, MARJORIE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1622 STAFFORD LANE	5.2 NAME	
STREET ADDRESS	SARASOTA FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	AS ASARCH, LARRY	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2100 CONSTITION	6.2 NAME	ASARCH, LARRY (speaking)
STREET ADDRESS	SARASOTA FL	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: Larry Asarch 2-2-98 941 927 6464

CFR2037 (10/97)