

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000742

FILED
Feb 24, 2012
Secretary of State

Entity Name: THE MANSIONS AT FOREST LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O COURTESY PROPERTY MGMT
13250 SW 135 AVENUE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

C/O COURTESY PROPERTY MGMT
13250 SW 135 AVENUE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 65-0741512 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE, #1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: FIGUEROA, ROLANDO MR
Address: 10063 SW 164 PLACE
City-St-Zip: MIAMI, FL 33196 US

Title: PD
Name: MCCLURE, KEITH MR
Address: 16503 SW 103 TERRACE
City-St-Zip: MIAMI, FL 33196 US

Title: SD
Name: LITTMAN, ALBERTA MS
Address: 16625 SW 101 TERRACE
City-St-Zip: MIAMI, FL 33196 US

Title: VPD
Name: WILSON, NIEVES MR
Address: 16555 SW 101 TERRACE
City-St-Zip: MIAMI, FL 33196 US

Title: TD
Name: GONZALEZ, CLAUDIA MS
Address: 10356 SW 165 AVENUE
City-St-Zip: MIAMI, FL 33196 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: KEITH MCCLURE

PD

02/24/2012

Electronic Signature of Signing Officer or Director

Date