


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006 8:00 am
Secretary of State

08-07-2006 90045 013 ****61.25

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1. Entity Name
FOREST RIDGE SHORES AT FOUNTAIN LAKES NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business
22201 FOUNTAIN LAKES BLVD. SUITE 1 ESTERO, FL 33928

Mailing Address
22201 FOUNTAIN LAKES BLVD. SUITE 1 ESTERO, FL 33928

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country



07262006 Chg-NP CR2E037 (4/06)

4. FEI Number
36-4278641

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CATTRELL, JERRY D
 222001 FOUNTAIN LAKES BLVD. SUITE 1
 ESTERO, FL 33928**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DICRISTFALO, VINCENT <input checked="" type="checkbox"/> Delete 22830 SNAPTAIL COURT ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PULS, RICHARD <input checked="" type="checkbox"/> Delete 3811 SPRINGSIDE DR. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLETT, RICHARD <input checked="" type="checkbox"/> Delete 3750 SPRINGSIDE DR. ESTERO, FL-33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WASLH, INGRID <input type="checkbox"/> Delete 3831 SPRINGSIDE DR. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DON GIDDENS 22782 SNAPTAIL CT. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JANE HULING 22842 FOUNTAIN LAKES BLVD. ESTERO, FL. 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition HENRY URBANK 3790 SPRINGSIDE DR. ESTERO, FL. 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Change <input type="checkbox"/> Addition INGRID WALSH 3831 SPRINGSIDE DR. ESTERO, FL. 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JOHN RELLIAS 22842 SNAPTAIL CT ESTERO, FL. 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered.

SIGNATURE: Don Giddens **7.22.06** **239 949 1481**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #