

**2003 NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # N99000000782**

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
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**20034367**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>36-4278641</b>		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
MYLI, MARILYN 22201 FOUNTAIN LAKES BLVD. SUITE 1 ESTERO, FL 33928				Name <b>Jerry D. Cattrell</b>			
				Street Address (P.O. Box Number is Not Acceptable) <b>22201 Fountain Lakes Blvd.</b>			
				Suite <b>1</b>			
				City <b>Estero</b>		FL	

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: DATE: **4/21/03**

(NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW - FEE IS \$61.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD DICRISTFALO, VINCENT	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	22830 SNAPTAIL COURT			NAME			
STREET ADDRESS	ESTERO, FL 33928			STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	VD SCOPPETTUOLO, ROBERT	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3821 SPRINGSIDE DRIVE			NAME			
STREET ADDRESS	ESTERO, FL 33928			STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	SD PARTLOW, CAROL	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3771 SPRINGSIDE DRIVE			NAME			
STREET ADDRESS	ESTERO, FL 33928			STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	TD SCOPPETTUOLO, ROBERT	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3821 SPRINGSIDE DRIVE			NAME			
STREET ADDRESS	ESTERO, FL 33928			STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. 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 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: Robert Scoppettuolo Robert Scoppettuolo 4/21/03 (239)-390-9571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)