FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 28 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N20958 (7)

1. Corporation Name
PARK FOREST OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
325 INDIAN RIVER LANE, STE. 2 ENGLEWOOD FL 34223	325 INDIAN RIVER LANE, STE. 2 ENGLEWOOD FL 34223

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/03/1987
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2810828 ☐ Applied For ☐ Not Applicable

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

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.
C/O CHAD M. MCCLENATHAN
680 SO. ORANGE AVE.
SARASOTA FL 34230

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD ☒ Change ☐ Addition
NAME	GRAYSON, EDWARD F. JR.	12 NAME	WEBB, PAUL E.
STREET ADDRESS	420 CYPRESS FOREST DR.	13 STREET ADDRESS	418 CYPRESS FOREST DR.
CITY-ST-ZIP	ENGLEWOOD FL	14 CITY-ST-ZIP	ENGLEWOOD, FL
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	YORKMARGE S	22 NAME	
STREET ADDRESS	326 FALLING WATERS LANE	23 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, MICHAEL J	32 NAME	
STREET ADDRESS	573 INTERSTATE BLVD	33 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	TD ☒ Change ☐ Addition
NAME	MERCER, RUTH C	42 NAME	REES, KENNETH
STREET ADDRESS	342 FALLING WATERS LANE	43 STREET ADDRESS	233 PARK FOREST BLVD.
CITY-ST-ZIP	ENGLEWOOD FL	44 CITY-ST-ZIP	ENGLEWOOD, FL
TITLE	VPD	51 TITLE	VPD ☒ Change ☐ Addition
NAME	WEBB, PAUL E	52 NAME	GEISELMANN, HARRISON
STREET ADDRESS	418 CYPRESS FOREST DR.	53 STREET ADDRESS	524 WEKIVA RIVER CT.
CITY-ST-ZIP	ENGLEWOOD FL	54 CITY-ST-ZIP	ENGLEWOOD, FL
TITLE	D	61 TITLE	D ☒ Change ☐ Addition
NAME	CONDE, BARBARA J	62 NAME	SHEEHAN, LILLIAN
STREET ADDRESS	517 WEKIVA RIVER CT	63 STREET ADDRESS	353 ANASTASIA DR.
CITY-ST-ZIP	ENGLEWOOD FL	64 CITY-ST-ZIP	ENGLEWOOD, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: PAUL E. WEBB — 475-1713
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0062674