2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725371

FOREST LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1058 FOREST LAKES DRIVE Mailing Address

1058 FOREST LAKES DRIVE NAPLES FL 34105

NAPLES FL 34105

FILED

Feb 28, 2001 8:00 am Secretary of State

2-28-2001 90085 042 ****61.25

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1487933 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) AHLING, JAMES 1058 FOREST LAKES DRIVE NAPLES FL 34105 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 P/D ☐ Change ☐ Addition TITLE **⊠** Delete TITLE LOWES, HAROLD NAME NAME BARRY, RICHARD 1046 FOREST LAKES DR. STREET ADDRESS STREET ADDRESS 1072 FOREST LAKES DR CITY-ST-ZIP NAPLES FL CITY-ST-7IP NAPLES FL 34105 Addition TITLE Delete TITLE ☐ Change VP/D JONES, ROBERT H NAME NAME FLETCHER, JOHN 1022 FOREST LAKES DRIVE STREET ADDRESS STREET ADDRESS 1053 FOREST LAKES DR I/108 CITY-ST-7IP CITY-ST-ZIP NAPLES FL NAPLES FL 34105 TITLE Change ■ Addition TITLE Delete CENEDELLA, RICHARD NAME NAME LAGONIGRO, FRANK 1057 FOREST LAKES DRIVE #205 STREET ADDRESS STREET ADDRESS 1044 FOREST LAKES DR CITY-ST-7IP CITY-ST-ZIP NAPLES FL NAPLES FL 34105 PD ☐ Addition Delete TITLE Change TITLE LARAMY, JOAN NAME NAME CARMELA GILBERTSEN 1083 FOREST LAKES DRIVE 101 STREET ADDRESS STREET ADDRESS 1024 FOREST LAKES DR CITY-ST-ZIP CITY-ST-ZIP NAPLES FL NAPLES FL 34105 D TITLE X Delete TITLE Change Addition SAWYER, ROGER NAME NAME HAAS, ROBERTA STREET ADDRESS STREET ADDRESS 1020 FOREST LAKES DRIVE 1057 FOREST LAKES DR 307 NAPLES FL CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 ☐ Delete Change ☐ Addition TITLE TITLE DOCKRELL, THOMAS NAME NAME 1081 FOREST LAKES DRIVE STREET ADDRESS STREET ADDRESS NAPLES FL 34105 CITY-ST-ZIP CITY-ST-ZIP

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 repeiver 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00