

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725371

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** FOREST LAKES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1058 FOREST LAKES DRIVE  
NAPLES, FL 34105 US

**New Principal Place of Business:**

**Current Mailing Address:**

1058 FOREST LAKES DRIVE  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 59-1487933

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRAUS & BALLENGER, P.A.  
1072 GOODLETTE RD  
NAPLES, FL 34102 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: P ( ) Delete  
Name: GOOTEE, ROBERT  
Address: 1055 FOREST LAKES DR F202  
City-St-Zip: NAPLES, FL 34105

Title: VPD ( ) Delete  
Name: VARNER, JOANNE  
Address: 1057 FOREST LAKES DR #108  
City-St-Zip: NAPLES, FL 34105

Title: TRD ( ) Delete  
Name: FRIES, GEORGE  
Address: 1061 FOREST LAKES DR  
City-St-Zip: NAPLES, FL 34105

Title: S ( ) Delete  
Name: CLARK, BARBARA  
Address: 1055 FOREST LAKES DR D112  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: FARNHAM, WILLARD  
Address: 1008 FOREST LAKES DR  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: POULSEN, ALLAN  
Address: 1087 FOREST LAKES DR #107  
City-St-Zip: NAPLES, FL 34105

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT GOOTEE

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date