

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004771

FILED
Apr 06, 2009
Secretary of State

Entity Name: FOREST TRAILS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ASC PROPERTY SERVICES INC.
3625 SR 419 SUITE 208
WINTER SPRINGS, FL 32708

New Principal Place of Business:

ASC PROPERTY SERVICES INC.
3625 SR 419 SUITE 280
WINTER SPRINGS, FL 32708

Current Mailing Address:

C/O ASC PROPERTY SERVICES INC.
PO BOX 196025
WINTER SPRINGS, FL 327196025

New Mailing Address:

ASC PROPERTY SERVICES INC.
PO BOX 196025
WINTER SPRINGS, FL 327196025

FEI Number: 56-2503335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASC PROPERTY SERVICES INC.
3625 SR 419
SUITE 208
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

ASC PROPERTY SERVICES INC.
3625 SR 419
SUITE 280
WINTER SPRINGS, FL 32708 US

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: ED HAYDEN

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: YOST, BOB
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

Title: DV () Delete
Name: CORBIN, TROY
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

Title: DST () Delete
Name: TIERNEY, SANDY
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CORBIN, TROY
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

Title: SD (X) Change () Addition
Name: TIERNEY, SANDY
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

Title: TD () Change (X) Addition
Name: DIAZ, FRANCIS
Address: PO BOX 196025
City-St-Zip: WINTER SPRINGS, FL 327196025

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: ED HAYDEN

MGR

04/06/2009

Electronic Signature of Signing Officer or Director

Date