

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004401

FILED
Sep 04, 2010
Secretary of State

Entity Name: THE FOREST OF COUNTRYWAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8104 POND SHADOW LANE
TAMPA, FL 33635

New Principal Place of Business:

Current Mailing Address:

8104 POND SHADOW LANE
TAMPA, FL 33635

New Mailing Address:

FEI Number: 59-3348605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, BRIAN
8108 POND SHADOW LANE
TAMPA, FL 33635 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: DIR
Name: BITCHAKAS, SHARON
Address: 8114 POND SHADOW LN
City-St-Zip: TAMPA, FL 33635

Title: DIR
Name: SUNDSTROM, DIANA
Address: 8118 POND SHADOW LN
City-St-Zip: TAMPA, FL 33635

Title: DIR
Name: VANWYK, MARK
Address: 8104 POND SHADOW LANE
City-St-Zip: TAMPA, FL 33635

Title: DIR
Name: OLASHAW, NANCY
Address: 8119 POND SHADOW LANE
City-St-Zip: TAMPA, FL 33635

Title: DIR
Name: POINTER, MICHELE
Address: 8101 STONEFIELD
City-St-Zip: TAMPA, FL 33635

I hereby 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 all other like empowered.

SIGNATURE: SHARON BITCHAKAS

DIR

09/04/2010

Electronic Signature of Signing Officer or Director

Date