

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724517

**Entity Name:** THE FOREST CLUB, INC.

**Current Principal Place of Business:**

640 E. STATE ROAD  
SUITE 3000  
LONGWOOD, FL 32750

**FILED**  
**Apr 27, 2022**  
**Secretary of State**  
**7222318218CC**

**Current Mailing Address:**

640 E. STATE ROAD  
SUITE 3000  
LONGWOOD, FL 32750 US

**FEI Number: 59-1805640**

**Certificate of Status Desired: No**

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

BONO AND ASSOCIATES, LLC  
640 E. STATE ROAD  
SUITE 3000  
LONGWOOD, FL 32750 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: MICHAEL L BONO**

**04/27/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           BELL, JAMES  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           SECRETARY  
Name           WINGFELD, DEBRA  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           PRESIDENT  
Name           BECKWITH, THOMAS  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           DIRECTOR  
Name           CAPLETTE, NANCY  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           DIRECTOR  
Name           FENTON, RICHARD  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           DIRECTOR  
Name           BRAMLETT, TERESA  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

Title           VP  
Name           BARNES, DAVID  
Address        640 E. STATE ROAD  
                  SUITE 3000  
City-State-Zip: LONGWOOD FL 32750

*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: THOMAS BECKWITH**

**PRESIDENT**

**04/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date