

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

DOCUMENT# 725371

**Entity Name:** FOREST LAKES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1058 FOREST LAKES DRIVE  
NAPLES, FL 34105**Current Mailing Address:**1058 FOREST LAKES DRIVE  
NAPLES, FL 34105**FEI Number:** 59-1487933**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADAMCZYK, STEVEN J  
999 VANDERBILT BEACH ROAD  
SUITE 300  
NAPLES, FL 34108 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HUGUS, KAREN  
Address 1059 FOREST LAKES DRIVE  
City-State-Zip: NAPLES FL 34105

Title VICE PRESIDENT  
Name BAILEY, PAUL  
Address 1083 FOREST LAKES DR #102  
City-State-Zip: NAPLES FL 34105

Title PRESIDENT  
Name RATH, SHARON  
Address 1054 FOREST LAKES DR H104  
City-State-Zip: NAPLES FL 34105

Title DIRECTOR  
Name GASTON, KENT  
Address 1051 FOREST LAKES DR  
City-State-Zip: NAPLES FL 34105

Title DIRECTOR  
Name REED, EDWARD  
Address 1056 FOREST LAKES DRIVE  
#B209  
City-State-Zip: NAPLES FL 34105

Title TREASURER  
Name BERNAL, PATRICK  
Address 1054 FOREST LAKES DR H205  
City-State-Zip: NAPLES FL 34105

Title DIRECTOR  
Name PECK, MARY JANE  
Address 1083 FOREST LAKES DR #106  
City-State-Zip: NAPLES FL 34105

Title SECRETARY  
Name DILLON, CHRIS  
Address 1057 FOREST LAKES DR #104  
City-State-Zip: NAPLES FL 34105

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*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 RATH**ACCOUNTANT****04/19/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	NORMAN, GLEN
Address	1087 FOREST LAKES DR #103
City-State-Zip:	NAPLES FL 34105