

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729781

Entity Name: FORESTBROOK I ASSOCIATION, INC.

Current Principal Place of Business:

%JIM NOBLES MANAGEMENT, INC
251 WINDWARD PASSAGE, SUITE F
CLEARWATER, FL 33767

Current Mailing Address:

%JIM NOBLES MANAGEMENT, INC
251 WINDWARD PASSAGE, SUITE F
CLEARWATER, FL 33767 US

FEI Number: 59-1763274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICHOLS, SHERON O
% JIM NOBLES MANAGEMNT, INC.
251 WINDWARD PASSAGE - SUITE F
CLEARWATER, FL 33767 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 PD, PRESIDENT
Name TROSCHINETZ, MIKE
Address 700 STARKEY RD # 911
City-State-Zip: LARGO FL 33771

Title SD
Name BOBERG, DIANE
Address 700 STARKEY RD #512
City-State-Zip: LARGO FL 33771

Title D, DIRECTOR
Name CONGALOSI, TOM
Address 700 STARKEY RD # 614
City-State-Zip: LARGO FL 33771

Title TREASURER
Name WHEELER, SHIRLEY
Address 700 STARKEY RD. #713
City-State-Zip: LARGO FL 33771

Title VP
Name CYRAN, MICHAEL
Address 700 STARKEY RD. #912
City-State-Zip: LARGO FL 33771

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: MIKE TROSCHINETZ

PRESIDENT

04/10/2015

Electronic Signature of Signing Officer/Director Detail

Date