

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758250

Entity Name: FOREST LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

720 BROOKER CREEK BLVD #206
OLDSMAR, FL 34677

Current Mailing Address:

720 BROOKER CREEK BLVD #206
OLDSMAR, FL 34677 US

FEI Number: 59-2266323

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCANNAVINO, INC
720 BROOKER CREEK BVLVD #206
OLDSMAR, FL 34677 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 P
Name DICANIO, GINO
Address 400 LAKEVIEW DR
City-State-Zip: OLDSMAR FL 34677

Title TD
Name NORDMEIER, GENE
Address 524 LAKEVIEW DRIVE
City-State-Zip: OLDSMAR FL 34677

Title SD
Name FLETCHER, LAURA
Address 579 LONGWOOD COURT
City-State-Zip: OLDSMAR FL 34677

Title D
Name ROGERS, PAUL
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name DICANIO, CAROL
Address 720 BROOKER CREEK BLVD. #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name HUGHES, RAY
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name LEE, BETTY
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name HUGHES, NICOLETTE
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

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: GINO DICANIO

PRESIDENT

01/31/2014

Electronic Signature of Signing Officer/Director Detail

Date