

2020 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 BVLD #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 PD
Name FLETCHER, LAURA
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

Title TD
Name MUSICK, STEPHEN
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

Title SD
Name BECKHAM, KIM
Address 720 BROOKER CREEK BLVD #206
City-State-Zip: OLDSMAR FL 34677

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

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

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

Title D
Name DIGIORGI, SAL
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: LAURA FLETCHER

PRESIDENT

02/11/2020

Electronic Signature of Signing Officer/Director Detail

Date