

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766056

FILED
Apr 07, 2016
Secretary of State
CC1737271604

Entity Name: FOREST RIDGE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2680 FOREST RIDGE DRIVE
FERNANDINA BCH., FL 32034-2347

Current Mailing Address:

7400 BAYMEADOWS WAY
SUITE 317
JACKSONVILLE, FL 32256 US

FEI Number: 59-2552425

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS OF JACKSONVILLE, INC.
7400 BAYMEADOWS WAY, SUITE317
JACKSONVILLE, FL 32256 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: NICHOLAS LAMBIASE, JR.

04/07/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name DILL, DAVID
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

Title TD
Name DOSH, KRISTI
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name GUTHRIE, GERRY
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

Title VPD
Name HOLCOMB, VON
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name REESE, JAMES
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name MASON, GENE
Address 7400 BAYMEADOWS WAY
SUITE 317
City-State-Zip: JACKSONVILLE FL 32256

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: DAVID DILL

PRESIDENT

04/07/2016

Electronic Signature of Signing Officer/Director Detail

Date