

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010464

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC0059214780**

**Entity Name:** FOREST CREEK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5991 CHESTER AVE SUITE 203  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

C/O INTERLACED PROPERTY SOLUTIONS  
5991 CHESTER AVE. SUITE 203  
JACKSONVILLE, FL 32217 US

**FEI Number:** 20-0451451

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INTERLACED PROPERTY SOLUTIONS, LLC  
5991 CHESTER AVENUE  
SUITE 203  
JACKSONVILLE, FL 32217 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:** TESSA CLARK

01/12/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           KUEHL, DANIEL  
Address        C/O INTERLACED PROPERTY SOLUTIONS  
                  5991 CHESTER AVE SUITE 203  
City-State-Zip: JACKSONVILLE FL 32217

Title           PRESIDENT  
Name           CATIC, MIRZA  
Address        C/O INTERLACED PROPERTY SOLUTIONS  
                  5991 CHESTER AVE. SUITE 203  
City-State-Zip: JACKSONVILLE FL 32217

Title           SECRETARY  
Name           ARMSTRONG, ELENA  
Address        C/O INTERLACED PROPERTY SOLUTIONS  
                  5991 CHESTER AVE. SUITE 203  
City-State-Zip: JACKSONVILLE FL 32217

Title           VP  
Name           CORDARA, BROOKE  
Address        C/O INTERLACED PROPERTY SOLUTIONS  
                  5991 CHESTER AVE SUITE 203  
City-State-Zip: JACKSONVILLE FL 32217

*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:** MIRZA CATIC

**PRESIDENT**

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date