## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010464

Entity Name: FOREST CREEK CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 29, 2013
Secretary of State
CC8313338721

## **Current Principal Place of Business:**

1730 FOREST LAKE CIR. E.

UNIT 1

JACKSONVILLE, FL 32225

## **Current Mailing Address:**

7400 BAYMEADOWS WAY SUITE 317 JACKSONVILLE, FL 32256

FEI Number: 20-0451451 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS OF JACKSONVILLE 7400 BAYMEADOWS WAY SUITE 317 JACKSONVILLE, FL 32225 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 01/29/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title PD

Name VATTER, MICHAEL E Name COOPER, PATRICIA

Address 7400 BAYMEADOWS WAY, SUITE 317 Address 7400 BAYMEADOWS WAY, SUITE 317

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR Title TD

Name KUEHL, DANIEL Name COVIC, ALMA

Address 7400 BAYMEADOWS WAY, SUITE 317 Address 7400 BAYMEADOWS WAY, SUITE 317

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32256

Title SD Title VPD

Name CATIC, MIRZA Name CATIC, MIRZA

Address 7400 BAYMEADOWS WAY, SUITE 317 Address 7400 BAYMEADOWS WAY, SUITE 317

City-State-Zip: JACKSONVILLE FL 32256 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.