

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000782

**Entity Name:** FOREST RIDGE SHORES AT FOUNTAIN LAKES  
NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Apr 29, 2024**  
**Secretary of State**  
**5507822510CC**

**Current Principal Place of Business:**

C/O PEGASUS PROPERTY MANAGEMENT  
8840 TERRENE CT #102  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

C/O PEGASUS PROPERTY MANAGEMENT  
8840 TERRENE CT #102  
BONITA SPRINGS, FL 34135 US

**FEI Number: 36-4278641**

**Certificate of Status Desired: No**

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

CHAPMAN, MICHAEL  
C/O PEGASUS PROPERTY MANAGEMENT  
8840 TERRENE CT #102  
BONITA SPRINGS, FL 34135 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: MICHAEL CHAPMAN**

**04/29/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WALSH, INGRID  
Address        8840 TERRENE CT #102  
City-State-Zip: BONITA SPRINGS FL 34135

Title            VICE PRESIDENT  
Name            HILDEBRAND, JANET  
Address        8840 TERRENE CT #102  
City-State-Zip: BONITA SPRINGS FL 34135

Title            TREASURER  
Name            CAMERON, WARREN  
Address        8840 TERRENE CT #102  
City-State-Zip: BONITA SPRINGS FL 34135

Title            SECRETARY  
Name            SISKI, JOYCE  
Address        8840 TERRENE CT #102  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            DEVILDER, SARA  
Address        8840 TERRENE COURT #102  
City-State-Zip: BONITA SPRINGS FL

*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: INGRID WALSH**

**PRESIDENT**

**04/29/2024**

Electronic Signature of Signing Officer/Director Detail

Date