## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000782

Entity Name: FOREST RIDGE SHORES AT FOUNTAIN LAKES

NEIGHBORHOOD ASSOCIATION, INC.

**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 04/07/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VICE PRESIDENT Name HILDEBRAND, JANET Name SMOCK, STEVE

Address 8840 TERRENE CT #102 Address 8840 TERRENE CT #102 City-State-Zip: **BONITA SPRINGS FL 34135** 

City-State-Zip: **BONITA SPRINGS FL 34135** 

Title **SECRETARY** Title DIRECTOR Name SISKA, JOYCE Name CAMERON, WARREN

Address 8840 TERRENE CT #102 Address 8840 TERRENE CT #102 **BONITA SPRINGS FL 34135** City-State-Zip: City-State-Zip: **BONITA SPRINGS FL 34135** 

Title **TREASURER** 

Name GASPER, ELIZABETH

8840 TERRENE COURT #102 Address

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: JANET HILDEBRAND

PRESIDENT

04/07/2021

**FILED** Apr 07, 2021

Secretary of State

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