

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707050

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** FOREST CITY COMMUNITY ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

172 ALDER COURT  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

172 ALDER COURT  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

COFFEY, HARVEY RICHARD  
172 ALDER CT  
ALTAMONTE SPRINGS, FL 32714 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COFFEY, RICHARD  
Address: 172 ALDER CT  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SD  
Name: COFFEY, DALE  
Address: 172 ALDER CT  
City-St-Zip: ALTAMONTE SPGS, FL 00000,

Title: TD  
Name: MUELLERS, LJEAN  
Address: 733 S OVERLOOK DR  
City-St-Zip: APOPKA, FL 32703

Title: VD  
Name: DOYLE, KENNETH  
Address: 141 DAHLIA DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VD  
Name: COFFEY, MARTY D.  
Address: 172 ALDER CT  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DVOF  
Name: COFFEY, MARK G  
Address: 3824 TRADE ST.  
City-St-Zip: DELTONA, FL 32738

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: H RICHARD COFFEY

P

01/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date