708039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

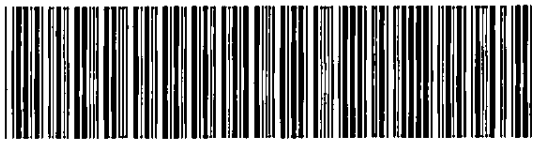
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100444464571

NP 8039

NP
8039

FOREST LAKES COUNTRY CLUB
ESTATES CONDOMINIUM
APARTMENTS ASSOCIATION, INC.

NEW

FILED IN OFFICE OF SECRETARY
OF STATE, STATE OF FLORIDA,
by AH, on NOV 2, 1964

TOM ADAMS
SECRETARY OF STATE

Secretary of State

State of Florida

TOM ADAMS
SECRETARY OF STATE

Tallahassee

November 2, 1964

In reply refer to
NPCorp-cb

Messrs. Rosin & Abel
2071 Main Street
Sarasota, Florida

Attention: Harvey J. Abel, Esquire

NP 8039

Gentlemen:

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.,
a corporation not for profit, has filed documents as indicated on November 2, 1964.

X Check in the amount of $12.
X New Articles of Incorporation
___ Articles of Incorporation from a Circuit Court with affidavit.
___ Articles of Reincorporation.
___ Amending Articles of Incorporation of record in this office.
___ Amending Articles of Incorporation from a Circuit Court.
___ Articles of Merger or Consolidation.
___ Certificate of Dissolution.
___ Petition for change of status to or from a corporation not for profit, and new Articles of Incorporation.
___ Resident Agent Certificate.
X Resident Agent form enclosed (to be completed and returned for filing)
___ Corporation report due July 1 of each year.
X Enclosures or details of filing:

Certified copy.

It is the pleasure of this office to promptly acknowledge the filing of your charter. Thank you for your courtesy.

Sincerely,

TOM ADAMS
Secretary of State

By
(Mrs.) Althea Norman
Nonprofit Supervisor
Corporations Division

AN/cb

Enclosure

corp-5
8-10-64

ROSIN & ABEL
ATTORNEYS AND COUNSELORS AT LAW
2071 MAIN STREET
SARASOTA, FLORIDA

ROBERT P. ROSIN
HARVEY J. ABEL

AREA CODE 813
955-

October 28, 1964

Honorable Tom Adams
Secretary of State of Florida
Office of the Secretary of State of Florida
Tallahassee, Florida

RE: FOREST LAKES COUNTRY CLUB ESTATES
CONDOMINIUM APARTMENTS ASSOCIATION, INC.
(a non-profit corporation). (Our file #493)

Dear Sir:

Enclosed please find original and duplicate of Articles of Incorporation of the above entitled corporation (a corporation not for profit, pursuant to Chapter 617 of the Laws of the State of Florida), together with our cheque in the amount of $12.00 to cover the following:

Filing Articles of Incorporation (A corporation not for profit)	$12.00
Certified Copy of Articles	3.00
Resident Agent Certificate	1.00
	$12.00

RECEIVED
NOV 2 3 57 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We would appreciate your returning to us the certified copy of the Articles of Incorporation and Resident Agent Certificate.

Thank you for your courtesy.

C. TAX
FILING 3.00
R. AGENT FEE 1.00
C. COPY 3.00
TOTAL 12.00
M. STATE 12.00 By
BALANCE DUE
PAID

Very truly yours,

ROSIN & ABEL

Harvey J. Abel

HJA/ps
enc

[redacted]surance
thereof on common elements and each unit, collectio
mittal of real property taxes and other common obli
public liability insurance on common elements; to

Sarasota, Florida.

RECEIVED
Nov 2 3 56 PM '84
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

APPROVED AND FILED

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a corporation not for profit, pursuant to Chapter 617 of the Laws of the State of Florida.

ARTICLE I

The name of this corporation shall be FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

ARTICLE II

PURPOSES: The purposes of this corporation are to provide, maintain and manage common, social and recreational facilities for the members of the corporation at FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS, situate in Sarasota County, Florida; to provide for and maintain lawns, walks and driveways, laundry facilities, administration for the Condominium, exterior painting and maintenance of each unit, maintenance of common stairways, balconies and roofs, utilities servicing common elements, garbage and trash collection for the benefit of each unit, water and sewer facilities to each unit, fire and extended coverage insurance to the value thereof on common elements and each unit, collection and transmittal of real property taxes and other common obligations, public liability insurance on common elements; to protect the

The mailing address shall be %Rosin & Abel, 2071 Main Street, Sarasota, Florida.

RECEIVED
MAY 2 3 56 PM '64
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

ARTICLES OF INCORPORATION

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a corporation not for profit, pursuant to Chapter 617 of the Laws of the State of Florida.

ARTICLE I

The name of this corporation shall be FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

ARTICLE II

PURPOSES: The purposes of this corporation are to provide, maintain and manage common, social and recreational facilities for the members of the corporation at FOREST LAKES COUBTRY CLUB ESTATES CONDOMINIUM APARTMENTS, situate in Sarasota County, Florida; to provide for and maintain lawns, walks and driveways, laundry facilities, administration for the Condominium, exterior painting and maintenance of each unit, maintenance of common stairways, balconies and roofs, utilities servicing common elements, garbage and trash collection for the benefit of each unit, water and sewer facilities to each unit, fire and extended coverage insurance to the value thereof on common elements and each unit, collection and transmittal of real property taxes and other common obligations, public liability insurance on common elements; to protect the

aesthetic qualities and beauty of FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS; to promulgate rules and regulations governing the use of the common, recreational and social facilities and grounds of FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS, as well as use and occupancy of the units; to undertake such activities and projects as will unite in companionship its members, and insure the continuation of enjoyable living conditions at FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS. In order to carry out these purposes, the corporation shall have the powers provided by Florida Statute 617.021, as well as all other express and applied powers of corporations not for profit, provided or allowed by or through the Laws of the State of Florida.

ARTICLE III

QUALIFICATION OF MEMBERS AND MANNER OF ADMISSION: The members of this corporation shall consist of the undersigned subscribers and such other persons as may be from time to time admitted to membership by the Board of Directors of the corporation in accordance with the provisions of the By-Laws of the corporation.

ARTICLE IV

TERM OF EXISTENCE: The term for which this corporation is to exist shall be perpetual, unless sooner dissolved pursuant to provisions of Florida Statute 617, as Amended.

ARTICLE V

NAMES AND RESIDENCES OF SUBSCRIBERS: The names and residences of the subscribers to these Articles are as follows:

NAME	RESIDENCE
LOUIS WAPNICK	2710 Tanglewood Drive Sarasota, Florida.
SIDNEY J. SKLAR	2746 Heather Place Sarasota, Florida.
MICHAEL A. CAPPE	105 Seagrape Venice, Florida

ARTICLE VI

OFFICERS AND DIRECTORS: The affairs of this corporation shall be managed by a governing board called the Board of Directors, who shall be elected at the regular meeting of the corporation. Vacancies on the Board of Directors may be filled until the next annual meeting, in such manner as provided by the By-Laws. The officers shall be: a President, Vice President, Secretary, Treasurer. They shall be selected by the Board of Directors. The officers and members of the Board shall perform such duties, hold office for such terms, and take office at such times as shall be provided in the By-Laws of the corporation.

ARTICLE VII

NAMES OF OFFICERS: The names of the officers who are to serve until the first appointment or election next following the filing of these Articles of Incorporation, pursuant to Florida Statutes, Chapter 617, as amended, are as follows:

NAME	OFFICE
SIDNEY J. SKLAR	PRESIDENT
MICHAEL A. CAPPE	VICE PRESIDENT
LOUIS WAPNICK	SECRETARY
LOUIS WAPNICK	TREASURER

ARTICLE VIII

NAMES AND ADDRESSES OF DIRECTORS: The first Board of Directors who shall serve until the election at the regular annual meeting next following the filing of these Articles of Incorporation, pursuant to Florida Statutes, Chapter 617, as Amended, are:

NAME	ADDRESS
LOUIS WAPNICK	2710 Tanglewood Drive Sarasota, Florida
LILLIAN WAPNICK	2710 Tanglewood Drive Sarasota, Florida
SIDNEY J. SKLAR	2746 Heather Place Sarasota, Florida
ALICE SKLAR	2746 Heather Place Sarasota, Florida
MICHAEL A. CAPPE	105 Seagrape Venice, Florida

ARTICLE IX

BY-LAWS: The By-Laws of this corporation may be made, altered or rescinded from time to time in whole or in part by the affirmative vote of two-thirds of the members of the corporation, at a regular annual meeting of the corporation, or a meeting called for that purpose.

ARTICLE X

AMENDMENT OF ARTICLES OF INCORPORATION: These Articles may be amended by a two-thirds vote of the members present and voting at any regular annual meeting of the corporation, provided, however, that these Articles of Incorporation shall not be amended unless written notice is first given of the proposed amendment to each corporate member of the corporation, not less than fifteen (15) days prior to the regular annual meeting of the corporation; such notice shall be sufficient, if it is published not less

than fifteen (15) days prior to the regular annual meeting of the corporation, in such publication as may be designated by the Board of Directors as the official journal of the corporation.

LOUIS WAPNICK

SIDNEY J. SKLAR

MICHAEL A. CAPPE

STATE OF FLORIDA)
:
COUNTY OF SARASOTA)

I HEREBY CERTIFY that on this day, before me, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared:

LOUIS WAPNICK
SIDNEY J. SKLAR
MICHAEL A. CAPPE

to me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they subscribed to these Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above, this 27th day of October, 1964.

Notary Public

(SEAL)

My Commission Expires:

NOTARY PUBLIC STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES JULY 7, 1968
BONDED THROUGH FRED W. DIESTELHORST

CORPORATION NOT FOR PROFIT

No. NP- 8039-A

Resident Agent Certificate

NAME

Forest Lake Country Club Estates, Condominium

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

11-9-64

TOM ADAMS
SECRETARY OF STATE

BY JES

COED-31

$1 FILING FEE PAID-CHARTER FILED-NOVEMBER 2, 1964.cb

STATE OF FLORIDA

OFFICE

SECRETARY OF STATE

CORPORATION NOT FOR PROFIT

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served

In pursuance of Section 617.023, Florida Statutes, the following is submitted, in compliance with said Act:

First—That FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.,

a corporation not for profit duly organized and existing under the laws of the State of Florida

with its principal place of business at City of Sarasota

County of Sarasota, State of Florida

has designated and established 2071 Main Street
(Street or building)

City of Sarasota, County of Sarasota

State of Florida, as its place of business or domicile for the service of process within this State, and named as its agents HARVEY J. ABEL

to accept service of process.

RECEIVED
NOV 2 2 23 PM '64
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Complete the following when there is a change of one or more officers or directors.

OFFICERS: AFFIX TITLES: NAME	SPECIFIC ADDRESS
SIDNEY J. SKLAR President	2746 Heather Place, Sarasota, Fla.
MICHAEL A. CAPPE Vice President	105 Seagrape, Venice, Florida
LOUIS WAPNICK Secretary-Treasurer	2710 Tanglewood Drive, Sarasota, Fla.

DIRECTORS: (THREE (3) required by law) NAME	SPECIFIC ADDRESS
SIDNEY J. SKLAR	2746 Heather Place, Sarasota, Fla.
MICHAEL A. CAPPE	105 Seagrape, Venice, Florida
LOUIS WAPNICK	2710 Tanglewood Drive, Sarasota, Fla.

By Sidney J. Sklar
President

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity.

By Harvey J. Abel
Resident Agent

Section 617.023, Florida Statutes. Office and resident agent. Every corporation organized hereunder shall maintain an office in this state with a resident agent thereat upon whom process may be served. The resident agent may be either an individual or a corporation. The corporation shall keep the secretary of state informed of the current city, town or village and street address of said office together with the name of the resident agent.
Filing Fee: $1.00

P-31

NP-8039

POSTMASTER
(Use) Reason for Non-Delivery
( ) Moved, left no address
( ) Out of business
( ) No such address
( ) Unknown
( ) Closed for winter
( ) Refused
RETURN REQUESTED

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Exempt Section 623.09, Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

BULK RATE
U. S. POSTAGE
PAID
Tallahassee, Fla.
Permit No. 89

Refer to This Number in All Correspondence

FOREST LAKES COUNTRY CLUB ESTATES ETAL
C/O 2071 MAIN STREET
SARASOTA FLA

66-06-NP-708039 1966

FILED
1966 JUL 5 PM 3:56

1. FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.
(Give exact name of corporation)

2. MANAGE social & recreational facilities, etc
(General nature of business or activity)

3. 2501-2507 Geneva Rd. (Street or Post Office Box of principal place of business) Sarasota (City) Sarasota (County) Florida (State)

4. a. E. Dan Wooldridge - Pres. 2507 Geneva Rd. Sarasota, Fla. (Officers-Name) (Title) (Address)
b. Harold I. Stecher - v. Pres. 2503 Geneva Rd. Sarasota, Fla.
c. Lois L. Olson - Secretary 2501 Geneva Rd. Sarasota, Fla.
d. Bernice Bish - Treasurer - 2505 Geneva Rd. Sarasota, Fla.
e.
f.
g.

5. a. E. Dan Wooldridge - Chairman - 2507 Geneva Rd. Sarasota, Fla. (Directors - Name) (Law requires at least (3) three) (Address)
b. Ray Hollandsworth 2507 Geneva Rd. Sarasota, Fla.
c. Arthur Lamneck, Jr. 2505 Geneva Rd. Sarasota, Fla.
d. Graham Richter 2507 Geneva Rd. Sarasota, Fla.
e. Ray Olson (Acting) 2501 Geneva Rd. Sarasota, Fla.
f.

6. N A (Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors June 20, 1966 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive inactivity began (Month - Day - Year)

10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 10-27-64 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business.

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Harold I. Stecher
By V-President

Attest: Lois L. Olson
Secretary

STATE OF FLORIDA
COUNTY OF SARASOTA

Personally appeared before me Harold I. Stecher, and Lois L. Olson who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 1st day of July, 1966.

(Notary Seal)

Signature of Notary taking acknowledgment

Notary Public, State of Florida at Large
My Commission Expires 10/11/69

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.

SEE INSTRUCTIONS ON BACK OF LAST COPY

ORIGINAL

NP-9039

Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 608.32(2), Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Refer to This Number in All Correspondence

1967 JUN 23 AM 9:1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

68-06-NP-706039 1967

FOREST LAKES COUNTRY CLUB ESTATES BOAL C/O-2021-MAIN-STREET SARASOTA FLA.
2507 Beneva Road Sarasota Florida Zip 33580

1. Forest Lakes Country Club Estates Condominium Apartments Association Inc. (Give exact name of corporation)
(General nature of business or activity) 2. Manage social & recreational act.

3. 2507 Beneva Road Zip 33580 (Street or Post Office Box of principal place of business) Sarasota (City) Sarasota (County) Florida (State)

4. a. Abraham Richter (Officers-Name) Director & President (Title) 2507 Beneva Road (Address)
b. Ray Hollandsworth Director & Vice President, 2507 Beneva Road
c. John Hodgkin Director 2507 Beneva Road
d. Samuel Hundley Director 2505 Beneva Road
e. Carrol Lockwood Director 2503 Beneva Road
f. William Miller Treasure 2503 Beneva Road
g. Helen Devenney Secretary 2503 Beneva Road

5. a. Abraham Richter President 2507 Beneva Road
(Directors - Name) (Law requires at least (3) three) (Address)
b. Ray Hollandsworth 2507 Beneva Road
c. John Hodgkin 2507 Beneva Road
d. Samuel Hundley 2505 Beneva Road
e. Carrol Lockwood 2503 Beneva Road
f.

6. N A (Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors June 7, 1967 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive inactivity began (Month - Day - Year)
10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 10-27-64 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)
13. If foreign corporation, give the number of States in which you do business.

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Ray Hollandsworth
By President or V-President

Attest: Helen W. Devenney
Secretary

STATE OF Florida
COUNTY OF Sarasota

Personally appeared before me who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 22nd day of June 1967

(Notary Seal)

Carol Fisher
Signature of Notary taking acknowledgment

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES OCT. 18, 1970
BONDED THROUGH FRED W. DIETZELBOST

COMP. 40 4-67

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

NP-0039

Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 608.32(2), Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

1968 SEP 16 AM 9:39

Refer to This Number in All Correspondence

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

68-00-NP-708039 1968

FOREST LAKES COUNTRY CLUB ESTATES ~~940 GOTT MAIN STREET~~ 2507 BENEVA ROAD
SARASOTA FLA 33580

1. Forest Lakes Country Club Estates Condominium Apartments Association, Inc. (Give exact name of corporation)

2. Non Profit Service (General nature of business or activity)

3. 2507 Beneva Road (Street or Post Office Box of principal place of business) Sarasota (City) Sarasota (County) Florida 33580 (State)

4. a. ABRAHAM Richter (Officers-Name) President (Title) 2507 Beneva Sarasota (Address)
b. Rev. H. Hollandsworth V. President 2507 Beneva Sarasota
c. William J. Miller Treasurer 2503 Beneva Sarasota
d. Mary S. Lockwood Secretary 2503 Beneva Sarasota
e.
f.
g.

5. a. ABRAHAM Richter (Directors - Name) (Law requires at least (3) three) 2507 Beneva Road, Sarasota, Fla. 33580 (Address)
b. Rev. H. Hollandsworth 2507 Beneva Road, Sarasota, Florida 33580
c. O.L.Hodgkin 2507 Beneva Road Sarasota, Fla. 33 580
d. Helen P. Cummins 2507 Beneva Road Sarasota, Fla. 33580
e. W. P. Hiner 2507 Beneva Road Sarasota, Fla. 33580
f.

6. (Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors 2-1-68 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive inactivity began (Month - Day - Year)

10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 11 - 2 - 64 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business.

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Abraham Richter Pres.
By President or V-President

Attest: Mary S. Lockwood
Secretary

STATE OF Florida
COUNTY OF Sarasota

Personally appeared before me who depones and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 15 day of July 1968

(Notary Seal)

Notary Public, State of Florida at Large
My Commission Expires July 21, 1969

Helen P. Cummins
Signature of Notary taking acknowledgment

Send Original to TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 608.32(2), Florida Statutes)

State of Florida
RECEIVED
TOM ADAMS
SECRETARY OF STATE
JUN 16 1970
Tallahassee, Florida

Refer to This Number in All Correspondence

NK 8039

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREST LAKES COUNTRY CLUB ESTATES CONDO
~~640 GULF MAIN STREET~~ 2507 BENEVA RD
SARASOTA FLA
33580

88-06-NP-708089 1970

MICROFILMED 8039

1. FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APT. ASSN. INC. (Give exact name of corporation) 2. CONDOMINIUM APTS (General nature of business or activity)

3. 2507 BENEVA RD (Street or Post Office Box of principal place of business) SARASOTA (City) (SARASOTA) (County) FLA (State) 33581

4. a. HARRY ROBBINS (Officers Name) PRESIDENT (Title) 2505 BENEVA RD (Address)
b. BLAKE PHILLIPS VICE-PRESIDENT 2501 BENEVA RD
c. MARIUS BRESSAUD TREASURER 2501 BENEVA RD
d. MRS GRACE B. CHAUSSEE SECRETARY 2501 BENEVA RD
e.
f.
g.

5. a. HARRY ROBBINS (Directors - Name) (Law requires at least (3) three) 2505 BENEVA RD (Address)
b. BLAKE PHILLIPS 2501 BENEVA RD
c. MRS. MARION REGELIN 2507 BENEVA RD
d. MR WM KENT 2503 BENEVA RD
e.
f.

6. (Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.022(), Florida Statutes.

7. Last meeting of Directors JUNE 1 1970 (Month - Day - Year) 8. Corporation Active? YES (Yes or No) 9. If inactive, inactivity began (Month - Day - Year)

10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 11/2/64 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business.

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Harry Robbins
By President ~~and Treasurer~~

Attest Grace B Chaussee
Secretary

STATE OF Florida
COUNTY OF Sarasota

Personally appeared before me Harry Robbins who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 12th day of June 1970.

(Notary Seal)

Marilyn McDaniel
Signature of Notary taking acknowledgment
Notary Public, State of Florida at Large
My Commission Expires April 24, 1971
Bonded by Travelers Indemnity Co.

Send Original to TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY) ORIGINAL

Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Jul 9 12 15 PM '70

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Refer to This Number in All Correspondence
15-04-A-008039
02/17/17

This return is due on July 1
1970

THE S F TRAVIS COMPANY
300 DELANNOY AVE
COCOA FLA 32923

MICROFILMED

8039

1. THE S. F. TRAVIS CO., INC. (Give exact name of corporation)
2. RETAIL HARDWARE (General nature of business)
3. 300 DELANNOY AVE. - P. O. DRAWER 490 (Street or Post Office Box of principal place of business) COCOA, (City) BREVARD, (County) FLORIDA (State)
4. a. S. F. TRAVIS (Officers-Name) PRESIDENT & TREASURER (Title) - 211 N. INDIAN RIVER DR., COCOA, FLA. (Address)
   b. R. H. WALL, VICE-PRES. & SECRETARY - 111 ROCKLEDGE AVE. - ROCKLEDGE, FLA.
   c. J. E. FIELD, EXEC. VICE-PRESIDENT & Gen. Mgr. - P. O. BOX 567 - COCOA, FLA.
   d.
5. a. S. F. TRAVIS - CHAIRMAN - 211 N. INDIAN RIVER DRIVE - COCOA, FLORIDA (Directors - Name) (Law requires at least (3) three) (Address)
   b. R. H. WALL - 111 ROCKLEDGE AVE. - ROCKLEDGE, FLORIDA
   c. MRS. W. W. WADE (Anita) - 2842 DOWNING STREET - JACKSONVILLE, FLORIDA
   d.
6. S. F. TRAVIS (Resident Agent Name) - 211 N. INDIAN RIVER DRIVE - COCOA, FLORIDA (Address)
7. Last meeting of Directors 5-4-70 (Month - Day - Year)
8. Corporation Active? YES (Yes or No)
9. If inactive, inactivity began (Month - Day - Year)
10. If inactive, will corporation begin business in the future? (Yes or No)
11. Date Incorporated 2-17-17 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)
13. Total Authorized Capital Stock:
    1297.5 (No. of shares with par value) $ 100.00 (Par value each)
    (No. of shares with par value) $ (Par value each)
    (No. of shares without par or nominal value)
14. Outstanding Capital Stock: (issued)
    (a) 1297.5 (No. of shares with par value) $ 100.00 (Par value each) $ 129,750.00 (Total value)
    (b) (No. of shares with par value) (Par value each) (Total value)
    (c) (No. of shares without par or nominal value) (Total value)
    (d) Total (a) + (b) + (c) $ 129,750.00 (Total value)
15. Amount of tax Due $ 200.00
16. Less Credit Memo if any $
17. Penalty and Interest (see instructions) $
18. Amount of tax remitted with this return $ 200.00
19. If foreign corporation, give amount of capital employed in Florida. $
20. If foreign corporation, give the number of States in which you do business.
21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

By President or V-President

Attest: R H Wall
Secretary

STATE OF FLORIDA
COUNTY OF BREVARD

Personally appeared before me
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 8th day of July 19 70

(Notary Seal) NOTARY PUBLIC STATE OF FLORIDA AT LARGE MY COMMISSION EXPIRES FEB 10, 1973 BONDED THRU WILLIAM F. DAVIS & SONS, INC.

Signature of Notary taking acknowledgment

FORM DR-105

Send Original and Third Copy to DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA
Send First copy to The Department of State, Tallahassee, Florida
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

1st COPY

RICHARD (DICK) STONE
Secretary of State
THE CAPITOL
TALLAHASSEE, FLA.
32304

STATE OF FLORIDA
DEPARTMENT OF STATE

PRIVILEGE TAX RETURN

FOR CORPORATIONS & OTHER ENTITIES

BLK. RT.
U.S. POSTAGE
PAID
TALLAHASSEE, FLA.
PERMIT #88

ADDRESS CORRECTION REQUESTED

53 1946

708039-68-06 11/02/64

FOREST LAKES COUNTRY CLUB ESTATES ETAL
C/O 2071 MAIN STREET
SARASOTA FLA

MAY -4 PM 10 - 57800 *****2.

DATE DUE: JAN. 1, 1972
DATE DELINQUENT: MAR. 1, 1972
PLEASE TYPE

Change Mailing Address to: 2507 Beneva Road
Sarasota, Florida Zip 33580

READ INSTRUCTIONS ON BACK

(Exact Corporate Name) — Fed. Emp. I.D. No.

1. Forest Lakes Country Club Estates — 2. 708039-68-06

(Street Address of Principal Office in Fla.) — (City) — (County) — (State) — (Zip)

3. 2507 Beneva Road — Sarasota — Sarasota — Florida — 33580

	(Officers Names)	(Title)	(Street Address)	(City)
4.(a)	Abraham Richter	President	2507 Beneva Rd	Sarasota
(b)	Albert Sadler	Vice Pres - Treasurer	" "	"
(c)	Milton L. Lewers	Secretary	" "	"
(d)				

	(Directors, Trustees, Managers)	(Street Address)	(City)
5.(a)	Abraham Richter	Same as above	
(b)	Albert Sadler		
(c)	Milton L Lewers		
(d)	Irene Dufort		

	(Resident Agent Name)	(Street Address)	(City)
6.	Abraham Richter		

7. General Nature of Business _____
8. Date Formed or Incorporated ___/___/___
9. If Foreign Corporation, Date Qualified in Florida ___/___/___

10. Capital Stock (or number and book value of all certificates of interest or participation):

	Class or Type	Par or Stated Value	Shares Authorized	Number	Book Value
(a)	None				$
(b)					$
(c)					$
(d)					$
(e)	Total Book Value of Stock (Certificates) Issued				$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined None

12. Close of annual accounting period for this return ___/___/___.

13. I/We declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31 have been paid as required under Chapter 201, Florida Statutes, and I/We further declare that this return is true and correct.

(Corporate Seal)

Attest: M. L. Lewers
Secretary or Assistant Secretary

(Corporate Name)

By: Abraham Richter
President or Vice President

PRIVILEGE TAX PROFIT ENTITIES $5.00 NON-PROFIT ENTITIES $2.00

READ INSTRUCTIONS ON BACK

PRIVILEGE TAX PROFIT ENTITIES $5.00 NON-PROFIT ENTITIES $2.00

***Return Original* (with Tax Payment) to DEPARTMENT OF STATE**
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

State of Florida
Department of State
ANNUAL REPORT
for Corporations and Other Entities

ADDRESS CORRECTION REQUESTED
DATE DUE: JAN. 1, 1973
DATE DELINQUENT: MAR. 1, 1973

Please refer to this number for future correspondence regarding this corporation

708039-68-06 11-2-64
FOREST LAKES COUNTRY CLUB ESTATES
2507 Beneva Rd.
Sarasota, Fla. 33580

FEB 28-73 1 189*******2.00
46 890

PLEASE TYPE

CHANGE MAILING ADDRESS TO: ~~Forest Lakes Country Club Estates~~ Condominium Apartment Association, Inc.
2507 Beneva Road, Sarasota, Florida Zip 33580

1. Forest Lakes Country Club Estates (Exact Corporate Name) Condominium Apartment Association, Inc.
2. (Fed. Emp. I.D. No.)

3. 2507 Beneva Road (Street Address of Principal Office in Fla.) Sarasota (City) Sarasota (County) Florida (State) 33580 (Zip)

	(Officers Names)	(Title)	(Street Address)	(City)	(State)
4. (a)	Blake Phillips	President & Director	2501 Beneva Rd.	Sarasota,	Florida
(b)	Rita Hayes	Vice-President & Director	2502 Beneva Rd.	Sarasota,	Florida
(c)	Marius Bressoud	Treasurer & Director	2501 Beneva Rd.	Sarasota,	Florida
(d)	Bernice Bish	Secretary & Director	2505 Beneva Road,	Sarasota,	Fla.

	(Directors, Trustees, Managers)		(Street Address)	(City)	(State)
5. (a)	Ray Moore	Director	2501 Beneva Rd.	Sarasota,	Fla
(b)	Marian Reglin	Director	2507 Beneva Rd.	Sarasota,	Fla.
(c)	Franklin Borden	Director	2507 Beneva Rd.	Sarasota,	Fla.
(d)					

	(Florida Resident Agent Name)	(Florida Street Address)	(City)	(Zip)
6. X	Blake Phillips.	2501 Beneva Road.	Sarasota	33580

7. General Nature of Business (See page 2) Condominium (Non-Profit)
8. Date Formed or Incorporated Nov/2: 1964 (MO DA YR)
9. If Foreign Corporation, Date Qualified in Florida ___/___/___ (MO DA YR)

10. Capital Stock (or number and book value of all certificates of interest or participation):

	Class or Type	Par or Stated Value	Shares Authorized	SHARES ISSUED Number	Book Value
(a)					$
(b)					$
(c)					$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined 1/36 Interest in Property rights granted to each owner-tenant.

12. Fiscal close of accounting period 12/31 (MO DA)

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.

(Corporate Seal)
Attest: Bernice Bish Secretary ~~or Assistant Secretary~~
Forest Lakes Country Club Estates Condominium Apartment Association, Inc. (Corporate Name)
By: Blake D. Phillips President ~~or Vice-President~~

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK

FILING FEE PER PROFIT ENTITY $5.00
PER NON-PROFIT ENTITY $2.00

Corp - AR73

ANNUAL REPORT
FOR CORPORATIONS AND OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

JUN 22 74-02 28200 ****2.00

SECRETARY OF STATE
RICHARD (DICK) STONE
P.O. BOX 8327
TALLAHASSEE, FLA. 32301

DUE JAN 1, 1974 DELINQUENT JULY 1, 1974

CORP-AR74 PAGE 1

(1) 700039 CHARTER NUMBER

(2) 11/02/1964 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.

(3) EXACT NAME: FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

(4) FED. EMP. I.D. NO. 77-7777777

(5) SICC 7777 (SEE PAGE 4)

(6) RESIDENT AGENT: PHILLIPS, BLAKE
2501 GENEVA RD
SARASOTA, FL 33580

(7) OFFICERS/DIRECTORS NAMES

OFFICERS/DIRECTORS NAMES	CITY / STATE	TITLE
PHILLIPS, BLAKE	SARASOTA, FL	P
AYRES, RITA	SARASOTA, FL	V
IS, BERNICE	SARASOTA, FL	S
PUGE, RAY	SARASOTA, FL	T
GLI, MARIAN	SARASOTA, FL	D
ARDEN, FRANKLIN	SARASOTA, FL	D

(8) FISCAL CLOSE OF ACCOUNTING PERIOD MO. 12

(9) FILING ADDRESS: 700039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
[illegible] ATTEST
SARASOTA [illegible]

CK #2057 5/8/74 pd

(10) PRIMARY STOCK

AUTH. STK. PAR VALUE

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

(11) AUTHORIZED SIGNATURE N. F. Borden

TITLE President TEL. NO. 921-2318

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

(4a) 59-6180553 FED. EMPLOYER ID. NO.

(5a) SICC 8699 (SEE PAGE 4)

(6a) Franklin Borden
2507 Beneva Road
Sarasota, Fla., 33580

(7a)

OFFICERS/DIRECTORS	STREET ADDRESS	TITLE
Franklin Borden	Sarasota	P
Morris Dempsey	Sarasota	VP
Sam Hundley	Sarasota	S
Nathan Strauss	Sarasota	T
James Bell	Sarasota	D
Bernice Johnson	Sarasota	D
Margaret Kent	Sarasota	D

IF ADDITIONAL OFFICERS/DIRECTORS, ATTACH SEPARATE SHEET

(8a) FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH)

(9a) 2507 Beneva Road
Sarasota, Fl., 33580

(9b) STREET ADDRESS 2507 Beneva Road
Sarasota, Fl., 33580

(10a) CAPITAL STOCK (OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)

	CLASS OR TYPE	PAR, NO. PAR, OR STATED VALUE	SHARES AUTHORIZED	NUMBER BOOK VALUE
(1)				$
(2)				$

(10b) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

Amended Declaration of Condominium filed 2/25/'71.

(12) RESIDENT AGENT SIGNATURE (IF DIFFERENT FROM NO. 6 (ABOVE))

PLEASE READ INSTRUCTIONS ON PAGE 2
FILING FEES $5.00 PROFIT ENTITY $2.00 NON PROFIT

CORPORATION ANNUAL REPORT

MAY 12-75 1 779*******2.00

DUE—JAN 1 DELINQUENT—JULY 1 VALIDATION AREA - DO NOT WRITE IN THIS SPACE

SECRETARY OF STATE
THE CAPITOL
TALLAHASSEE FLORIDA
32304

(1) 708039 CHARTER NUMBER | 5

(2) 11/02/1964 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.

(3) SICC (SEE ENVELOPE BACK) 8699

(3a) CHANGE TO:

1974 YEAR OF LAST REPORT FILED IN THIS OFFICE

1975 YEAR(S) THIS REPORT COVERS

(4) FED EMPLOYER ID. NO 59-6180553

(4a) CHANGE TO:

(5) FISCAL CLOSE OF ACCOUNTING PERIOD (MO) 12

(5a) CHANGE TO:

(6) EXACT NAME: FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

FILED
MAY 2 8 46 AM 197
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(7) RESIDENT AGENT AND STREET ADDRESS (IF RESIDENT AGENT AND/OR ADDRESS CHANGE, A.A. Form sent 5-2-75 THIS OFFICE AT THE ABOVE ADDRESS. PROPER FORMS.)

[redacted]
2507 BENEVA RD
SARASOTA, FL 33580

PLEASE READ INSTRUCTIONS ON BACK

NOTICE IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF THE CORPORATION TO COMPLY WITH THIS REQUIREMENT. PLEASE CHANGE THE MAILING ADDRESS TO INCLUDE THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED.

(8) ADDRESS
708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA 33580

(8a) CHANGE TO:

NO P.O. BOX

(9) OFFICERS/DIRECTORS NAMES

OFFICERS/DIRECTORS NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)	
[redacted]		SARASOTA, FL	PRES	DIR
Dempsey, Morris	2505 Beneva Rd.,			
[redacted]		SARASOTA, FL	V.P.	DIR
James Roy Bell	2507 Beneva Rd.,			
[redacted]		SARASOTA, FL	SEC	DIR
Mrs. Irene Dufort	2503 Beneva Rd.,			
STRAUSS, NATHAN	2503 Beneva Rd.,	SARASOTA, FL	TRES	DIR
[redacted]		SARASOTA, FL	VTR	
Mary Rita Hayes	2503 Beneva Rd.,			
[redacted]		SARASOTA, FL	DTR	
Gloria Moore	2501 Beneva Rd.,			

CAPITAL STOCK

(10)

(10a) CAPITAL STOCK (OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)

CLASS OR TYPE	PAR NO PAR, OR STATED VALUE	SHARES AUTHORIZED	NUMBER BOOK VALUE
(1)			$
(2)			$

IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

Amended Declaration of Condominium filed 2/25/'71.

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE M. L. Dempsey

TITLE President TEL. NO. 922-5064

DATE January 21, 1975.

CORP-AR 75

REPORT IS DUE: JAN. 1
DELINQUENT: JULY 1

ADDITIONAL DIRECTOR

Marion Regelin 2507 Beneva Rd., Sarasota, Fl DIR

ALL 7 are Directors--the FOUR (4) STREET NUMBERS represent the various buildings--all together at one postal address--
2507 Beneva Rd.,

FILED
MAY 2 8 9 46 AM 1975
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7-08039

708039

STATE OF FLORIDA

DEPARTMENT OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served and Names and Addresses of the Officers and Directors.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

a corporation organized (or organizing) under the laws of the State of Florida with its principal office and ~~mailing~~ at 2507 Beneva Road in the city of Sarasota, County of Sarasota State of Florida 33580, has named Morris Dempsey, located at 2505 Beneva Road, Apt. 3-Estate House
(Street address & Number of Bldg., P. O. Box address not acceptable)

City of Sarasota, County of Sarasota (33580)

State of Florida, as its agent to accept service of process within this state.

FILED
75 MAY 12 PM 3 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICERS: & DIRECTORS (ALL OFFICERS ARE ALSO DIRECTORS)

NAME	TITLE	SPECIFIC ADDRESS
Morris Dempsey	(P)	2505 Beneva Road, Sarasota, Fla.,
Mrs. Irene Dufort	(S)	2503 Beneva Road, Sarasota, Fla.,
Nathan Strauss	(T)	2503 Beneva Road, Sarasota, Fla.,
James Roy Bell	(V)	2507 Beneva Road, Sarasota, Fla.,

DIRECTORS:	SPECIFIC ADDRESS
Gloria Moore	2501 Beneva Road, Sarasota, Fla.,
Mary Rita Hayes	2503 Beneva Road, Sarasota, Fla.,
Marian Kegelin	2507 Beneva Road, Sarasota, Fla.,

By Kathleen R. Strauss
(corporate officer)
Director & Treasurer

ACCEPTANCE:

I agree as Resident Agent to accept Service of Process: to keep office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in office as required by law.

Filing fee: $3.00

Morris Dempsey
(Resident Agent)

Corp 23
1-21-75

ANNUAL REPORT FEES
$5.00 PROFIT CORP
$5.00 NON-PROFIT CORP

CORPORATION ANNUAL REPORT

DUE—JAN 1 DELINQUENT AFTER MAY 1 VALIDATION AREA - DO NOT WRITE IN THIS AREA

- 74700 *****5.00

RETURN THIS FORM AND FEE TO

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

(1) 708039 5 — CHARTER NUMBER

(2) 11/02/1964 — DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA

(3) SICC (SEE ENVELOPE BACK) 8699

(3a) CHANGE TO:

(4) FED. EMPLOYER ID. NO. 59-6180553

(4a) CHANGE TO:

1975 — YEAR OF LAST REPORT FILED IN THIS OFFICE

1976 — YEAR(S) THIS REPORT COVERS

PLEASE READ INSTRUCTIONS ON BACK

(5) EXACT NAME: FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC

(6) STREET ADDRESS OF PRINCIPAL OFFICE. POST OFFICE BOX ALONE WILL NOT BE ACCEPTABLE

ADDRESS: 708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 GENEVA RD
SARASOTA FLA 33580

(6a) STREET ADDRESS CHANGE

(7) REGISTERED AGENT AND STREET ADDRESS: Harold H. Underwood
2505 GENEVA RD, ESTATE HOUSE
Apartment 8
SARASOTA, FL 33580

(7a) REGISTERED AGENT NAME CHANGE AND/OR ADDRESS CHANGE INCLUDE REGISTERED OFFICE ADDRESS

(8) TYPE CORRECTIONS IN SPACE PROVIDED BELOW. STRIKE THROUGH INCORRECT ENTRIES. CORRECTIONS MUST BE LEGIBLE

NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN	
[illegible]	2505 GENEVA RD	SARASOTA, FL	PRES	DIR
HAROLD H. UNDERWOOD	" " "	"	"	"
[illegible]ELL, JAMES ROY	2507 GENEVA RD	SARASOTA, FL	V.P.	DIR
Myron Kebler	2505 Geneva Rd.,	" "	Dir.	
[illegible]OFG. T, MRS. IRENE	2503 GENEVA RD	SARASOTA, FL	SEC	DIR
[illegible]	[illegible]	SARASOTA, FL	[illegible]	DIR
Ruby Hiner	2507 Geneva Rd.,	" "	Treas.	Dir
[illegible]	[illegible]	SARASOTA, FL	[illegible]	
Hazel B. Smith	2501 Geneva Rd.,	" "	Dir.	
[illegible]	[illegible]	SARASOTA, FL	[illegible]	
Martha [illegible]	2505 Geneva Rd.	" "	Dir	

DO NOT WRITE IN THIS SPACE

APR 1 1976 — FLORIDA DEPARTMENT OF STATE — TALLAHASSEE, FLORIDA

FOR DIVISION USE ONLY

4/1/76

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPOWERED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH

SIGNATURE Harold H. Underwood

HAROLD H. UNDERWOOD

TITLE PRESIDENT TEL. NO. 922-1464

DATE February 6, 1976

CORP-AR75

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Bruce A. Smathers
Secretary of State
Form COR 620

CORPORATION ANNUAL REPORT

1977

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE.

APPROVED JAN 21-77 518[illegible]

AND
FILED

JAN 31 1 17 PM 1977

FLORIDA SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

708039 FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APART
2507 BENEVA RD
SARASOTA FLA 33580

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
11/02/1964	59-6190553	1976

6. Names and Street Addresses of Each Officer and Director

Name of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
UNDERWOOD, HAROLD H.	PRES	DIR	2505 BENEVA RD	SARASOTA, FL
BELL, JAMES ROY		DIR	2507 BENEVA RD	SARASOTA, FL
DUFORT, MRS. IRENE		DIR	2503 BENEVA RD	SARASOTA, FL
HINER, RUBY		DIR	2507 BENEVA RD	SARASOTA, FL
SMITH, HAZEL B.		DIR	2501 BENEVA RD	SARASOTA, FL
DAY, MARTHA		DIR	2505 BENEVA RD	SARASOTA, FL

7. Registered Agent Information

Name: DEMPSEY, MORRIS
Street Address (Do NOT Use P.O. Box Number): 2505 BENEVA RD, APT 3-ESTATE HOU
City, State and Zip Code: SARASOTA, FL 33580

If you wish to change Registered Agent on this form, enter all new information here ▶

Name: Blake Phillips
Street Address (Do NOT Use P.O. Box Number): 2501 Beneva Rd. - Apt. 1
City, State and Zip Code: Sarasota, Fl. 33580

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

1/31/77

Typed Name of Signing Officer: Marius Bressoud
Title: Treasurer
Telephone Number: 922-1997
Signature:
Date: Jan. 10, 1977

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

New 1977 Directorate

Blake Phillips	Pres. Dir.	2501 Beneva Road	Sarasota, Fl. 33580
Roy Day	V-P Dir.	2503 Beneva Road	Sarasota, Fl. 33580
Marius Bressoud	Treas. Dir.	2501 Beneva Road	Sarasota, Fl. 33580
Bernice Bish	Sec. Dir.	2503 Beneva Road	Sarasota, Fl. 33580

NP # 8039 ✓ O

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS/ ASSOCIATION, INC.

(X) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: NOVEMBER 2, 1964 By: Rosin & Abel, 2071 Main St. Sarasota, Florida PD

(A) Resident Agent Certificate. Filed Nov. 2, 1964.

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 620) 12-1-77

APPROVED AND FILED
FEB 13 2 1928 ****10
MAY 26 12 30 PM 1978
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

708C39 FOREST LAKES COUNTRY
CLUB ESTATES CONDOMINIUM APART
2507 BENEVA RD
SARASOTA FLA 33580

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address:
P.O. Box No.:
City:
State: Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
11/02/1964	59-6180553	1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~PHILLIPS, BLAKE~~	~~DIR~~		~~2501 BENEVA RD~~	~~SARASOTA, FL~~
~~BAY, RAY~~	~~DIR~~		~~2503 BENEVA ROAD~~	~~SARASOTA, FL~~
~~PRESSOUD, MARIUS~~	~~DIR~~		~~2501 BENEVA RD~~	~~SARASOTA, FL~~
BISH, BERNICE	Pres ~~DIR~~	X	2508 BENEVA RD	SARASOTA, FL
Regelin, Marian	V.Pres	X	2507 Beneva	Sarasota Fla
~~Kennedy, John~~	~~Sec~~	X	2507 Beneva	Sarasota Fla
Kebler, Katherine	Tres	X	2505 Beneva	~~Sarasota Fla~~

7. Registered Agent Information

Name: ~~PHILLIPS, BLAKE~~
Street Address (Do NOT Use P.O. Box Number): ~~2501 BENEVA ROAD~~
City, State and Zip Code: ~~SARASOTA, FL 33580~~

If you wish to change Registered Agent on this form, enter all new information here ▶

Name: Bish, Bernice
Street Address (Do NOT Use P.O. Box Number): 2505 Beneva Road
City, State and Zip Code: Sarasota Fla 33582

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer: Bernice Bish
Title: President
Telephone Number: 924 6042
Signature: Bernice Bish
Date: 1/10/78

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

1979

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

MAR 16 11 12 AM 97

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

THIS REPORT MUST BE ACCOMPANIED BY A

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA ~~33580~~ 33582

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code 33582

3. Date Incorporated or Qualified To Do Business in Florida: 11/02/196[illegible]

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~BISH, BERNICE~~	~~P/D~~	~~2505 BENEVA RD.~~	~~SARASOTA, FL~~
~~REGELIN, MARIAN~~	~~V/D~~	~~2507 BENEVA~~	~~SARASOTA, FL~~
KENNEDY, JOHN	S/D	2507 BENEVA	SARASOTA, FL
KEBLER, KATHERINE	T/D	2505 BENEVA	SARASOTA, FL
Frank Mason	P/D	2503 Beneva	Sarasota Fl.
Tom Harrington	V/D	2501 Beneva	Sarasota, Fl.

7. Registered Agent Information

Name: ~~BISH, BERNICE~~
Street Address (Do NOT Use P.O. Box Number): 2505 BENEVA ROAD
City, State and Zip Code: SARASOTA, FL. 33582

If you wish to change Registered Agent on this form, enter all new information below.

Name: KATHERINE E. KEBLER
Street Address (Do NOT Use P.O. Box Number): 2505 BENEVA RD
City, State and Zip Code: SARASOTA FL. 33582

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

DO NOT WRITE IN THIS SPACE

Typed Name of Signing Officer: Katherine E. Kebler
Title: Treasurer
Signature: Katherine E. Kebler
Title: Treasurer
Date: 3/16
Telephone Number: 922-5825

(Form COR 620 Rev. 10/76)

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1980

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

Apr 17 10 09 PM 1980

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 11/02/1964

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 1979

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
KENNEDY, JOHN	S/L	2507 BENEVA	SARASOTA, FL
~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~
MASON, FRANK	P/D	2503 BENEVA	SARASOTA, FL
~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~
RIDDLE, JOANNA	V/D	2501 BENEVA	SARASOTA, FL.
BORDEN, FRANKLIN	T/D	2507 BENEVA	SARASOTA, FL.

7. Registered Agent Information

Name: ~~[illegible]~~ BORDEN, FRANKLIN

Street Address (Do NOT Use P.O. Box Number): ~~[illegible]~~ 2507 BENEVA RD.

City, State and Zip Code: SARASOTA, FL 33582

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with fee of $3

Dmc 4-19-80

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: BORDEN, FRANKLIN

Title: TREASURER

Telephone Number: (813) 921-2318

Signature: H. Franklin Borden

Date: March 6, 1980.

DO NOT WRITE IN THIS SPACE

708039 04-07-80 2 5 1334 10.00

(Form COR 420) Rev. 11/18/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED
MAY 29 2 32 PM 1981
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.
Street Address
P.O. Box No.
City
State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 11/02/1969

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~MCKNIGHT, JOHN~~	~~S/D~~	~~2507 BENEVA~~	~~SARASOTA, FL~~
RIDDLE, JOANNA	V/D	2501 BENEVA	SARASOTA, FL
~~MASON, FRANK~~	~~P/D~~	~~2503 BENEVA~~	~~SARASOTA, FL~~
BORDEN, FRANKLIN	T/D	2507 BENEVA	SARASOTA, FL
RICHTER, ABE	P/D	2507 BENEVA	SARASOTA, FL
PETERSON, MARJORIE	S/D	2501 BENEVA	SARASOTA, FL

7. Registered Agent Information

Name
BORDEN, FRANKLIN
Street Address (Do NOT Use P.O. Box Number)
2507 BENEVA ROAD
City, State and Zip Code
SARASOTA, FL 33582

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: BORDEN, FRANKLIN
Title: TREASURER
Telephone Number: (813) 921-2318

Signature: N. Franklin Borden 708039 03-27-81
Date: March 30, 1981

DO NOT WRITE IN THIS SPACE

Form COR 615 Rev. 10/78-80

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1982

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

George Firestone
Secretary of State

APPROVED
AND
FILED
JAN 29 7 38 PM 1982

Read Notice and instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address:
P.O. Box No.
City:
State: Zip Code:

3. Date Incorporated or Qualified to Do Business in Florida: 11/02/1964

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 05/29/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
RICHTER, ABE	P/D	2507 BENEVA	SARASOTA, FL
RIDDLE, JOANNA	V/D	2501 BENEVA	SARASOTA, FL
PETERSON, MARJORIE	S/D	2501 BENEVA	SARASOTA, FL
~~BORDEN, FRANKLIN~~	~~T/D~~	~~2507 BENEVA~~	SARASOTA, FL
Herzog, Ruth E.	T/D	2505 Beneva	Sarasota, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

BORDEN, FRANKLIN
2507 BENEVA ROAD
SARASOTA, FL 33582

8. Name and Address of New Registered Agent

Name: Herzog, Ruth E.
Street Address (Do NOT Use P.O. Box Number): 2505 Beneva Road
City, State and Zip Code: Sarasota, Fla. 33582

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

The change was adopted by resolution duly adopted by the board of directors on December 6th. 1981

SIGNATURE: (Registered Agent Accepting Appointment) DATE: 1-11-82

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instruction on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature:
Date: January 11th. 1982

Type or Print Name of Signing Officer: Herzog, Ruth E.
Title: Treas./Dir.
Telephone Number: 924-3803

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

PRESENTED

FILED

JAN 20 1 20 PM 1983

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

708039
FOREST LAKES COUNTRY CLUB ESTATES ETAL
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 11/02/1964

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 01/29/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
RIDDLE, JOANNA	V/D	2501 BENEVA	SARASOTA, FL 0000
HERZOG, RUTH E	T/D	2505 BENEVA	SARASOTA, FL 0000
RICHTER, ABE	P/D	2507 BENEVA	SARASOTA, FL 0000
PETERSON, MARJORIE	S/D	2501 BENEVA	SARASOTA, FL 0000

Registered Agent Information

7. Name and Address of Current Registered Agent

HERZOG, RUTH E

2505 BENEVA ROAD

33582

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

The change was authorized by resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature: [signature]

Date: 1-6-83

Type or Print Name of Signing Officer: Ruth E. Herzog

Title: Treasurer

Telephone Number: 813 - 924-3803

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

◄ Read Notice and Instructions on Other Side Before Making Entries. ►

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1 Name and Address of Corporation Principal Office

708039
FOREST LAKES COUNTRY CLUB ESTATES CONDOMIN
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 11/02/1964

4 Federal Employer Identification Number (FEIN): 59-1805 53

5 Date of Last Report: 01/28/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	RIDDLE, JOANNA	V/D	2501 BENEVA	SARASOTA, FL 0000
2	HERZOG, RUTH E	T/D	2505 BENEVA	SARASOTA, FL 0000
3	RICHTER, ABE	P/D	2507 BENEVA	SARASOTA, FL 0000
4	PETERSON, MARJORIE	S/D	2501 BENEVA	SARASOTA, FL 0000

SEE ATTACHED ✓

Registered Agent Information

7. Name and Address of Current Registered Agent

HERZOG, RUTH E
2505 BENEVA ROAD
SARASOTA, FLA 33582

8. Name and Address of New Registered Agent

Name: Clopine, John J. ✓

Street Address (Do NOT Use P.O. Box Number): 2505 Beneva Rd. ✓

City, State and Zip Code: Sarasota, Fl. 33582

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: 6 December 1983

SIGNATURE: John J. Clopine (Registered Agent Accepting Appointment) DATE: 1-24-84

$3.00 additional fee required for Registered Agent changes.

10 *See signature restrictions under Instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature: John J. Clopine Date: 1-24-84

Typed Name of Signing Officer: Clopine, John J Title: Treasurer Telephone Number: 813-922-1823

11 *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates

COR 6220 (1-84)

The officers for 1984 are

Blake Phillips President
2501 Benera Rd.
Sarasota, Fl. 33581

Maurice Rothstein 1st V.P.
2503 Benera Rd.

★John Colopino, Treas.
2505 Benera Rd.

Blanche Borden, Sect.
2507 Benera Rd.

ANNUAL REPORT
1985

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required — Make Checks Payable To: *Secretary of State*

Name and Address of Corporation Principal Office

708039 3
FOREST LAKES COUNTRY CLUB ESTATES CONDOMIN
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the corrected address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P. O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

Date Incorporated or Qualified to Do Business in Florida 11/02/1964

4. Federal Employer Identification Number 59-6150553

5. Date of Last Report 03/14/1984

Names and Street Addresses of Each Officer and Director, as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	PHILLIPS, BLAKE	P	2501 BENEVA RD	SARASOTA, FL 0000
2	ROTHSTEIN, MAURICE	V	2503 BENEVA RD	SARASOTA, FL 0000
3	~~CLOPINE, JOHN~~	~~T~~	~~2505 BENEVA RD~~	~~SARASOTA, FL 0000~~
4	~~BORDEN, BLANCHE~~	~~S~~	~~2507 BENEVA RD~~	~~SARASOTA, FL 0000~~
5	Kennedy, John H.	S	2507 Beneva Rd	Sarasota, Fl 33582
6	Ismeurt, Mary G.	T	2507 Beneva Rd	Sarasota, Fl 33582

Registered Agent Information

7. Name and Address of Current Registered Agent

CLOPINE, JOHN J
2505 BENEVA RD
SARASOTA, FL 33582

8. Name and Address of New Registered Agent

Name: Ismeurt, Mary G.

Street Address (Do NOT Use P.O. Box Number): 2507 Beneva Road

City, State and Zip Code: Sarasota, Fl 33582

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by resolution duly adopted by its board of directors on ...

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE Mary G. Ismeurt (Registered Agent Accepting Appointment) DATE March 7,1985

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation or the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath. Officer signing must be listed in Block 6.

Signature | Date

Name of Signing Officer | Title | Telephone Number

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

...ORATION

ANNUAL REPORT
1986

...OF THE DEPARTMENT OF STATE
...Secretary of State
...DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

T08039
3
FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP
2507 BENEVA RD
SARASOTA FLA 33582

2 Enter Change of Address of Corporation in Principal Office (P.O. Box Number Alone is NOT Sufficient)

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

3 Dated or Qualified to Transact Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
11/02/1964	59-6180653	03/14/1985

Current Addresses of Each Officer and Director as of December 31, 1985

Name of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	
[illegible]	P	[illegible]		
Milton L. Lewers	P	2507 Beneva Road	SARASOTA, FL	00000
[illegible]	V	[illegible]		
Joanna S. Riddle	V	2501 Beneva Road	SARASOTA, FL	00000
[illegible]	S	[illegible]		
Ruth E. Herzog	S	2505 Beneva Road	SARASOTA, FL	00000
ISMEURT, MARY G.	T	2507 BENEVA RD	SARASOTA, FL	00000

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

ISMEURT, MARY G.
2507 BENEVA ROAD
SARASOTA, FL 33582

8 Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83 FL.

Zip Code 84

...provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, sub... ...the purpose of changing its registered office or registered agent, or both, in the State of Florida, is authorized by resolution duly adopted by its board of directors on ...

...the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325, F.S.

(Registered Agent Accepting Appointment) DATE

$3.00 additional fee required for Registered Agent changes.

See signature request and other instructions on reverse side of this form.

...I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. ...ify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath; ...on must be listed in Item 81.

Mary G. Ismeurt — Date: March 4, 1986

Name: Mary G. Ismeurt — Title: Treasurer — Telephone Number: (813) 924-9544

$5.00 Additional Fee required for Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To: Secretary of State

1. Name and Address of Current Principal Office

708039 3
FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP
2507 BENEVA RD
SARASOTA FLA 33582

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified to Do Business in Florida: 11/02/1964

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 03/21/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
~~DEGERS, MILTON L.~~	~~P~~	~~2507 BENEVA ROAD~~	~~SARASOTA, FL~~	~~00000~~
MASON, FRANK	P	2503 BENEVA ROAD	SARASOTA FL.	
PICOLE, JOANNA S.	V.P.	2501 BENEVA ROAD	SARASOTA, FL	00000
MCVEIGH, JOHN	V.P.	2507 BENEVA ROAD	SARASOTA FL.	
~~HERZOG, RUTH E.~~	~~S~~	~~2505 BENEVA ROAD~~	~~SARASOTA, FL~~	~~00000~~
[illegible], MARTHA	S.			
ISHELRT, MARY G.	T.	2507 BENEVA RD	SARASOTA, FL	00000
DAILEY, MAX	D.	2505 BENEVA RD	SARASOTA FL.	
LUNATI, LISA	D.	2505 BENEVA RD	SARASOTA FL.	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

ISHEART, MARY G.
2507 BENEVA ROAD
SARASOTA, FL 33582

8. Name And Address of New Registered Agent

Name 81: BYRD REALTY INC.

Street Address 1 (Do NOT Use P.O. Box Number) 82: 6587 GATEWAY AVENUE

Street Address 2 (Do NOT Use P.O. Box Number) 83: SARASOTA FLORIDA 33581

City and State 84: FL.

Zip Code 85:

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: 2/17/87

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

Signature: M.F. Byrd (Registered Agent Accepting Appointment) DATE: 2/17/87

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6)

Signature: Frank Mason

Date: 2/17/87

Typed Name of Person Signing: Frank Mason

Title: President

Telephone Number:

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2K CDA (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

708039
FORBST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP
2507 BENEVA RD
SARASOTA FLA ~~33582~~

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24 34232

3. Date Incorporated or Qualified To Do Business in Florida 11/02/1964

4. Federal Employer Identification Number (FEIN) 59-6180553

5. Date of Last Report 03/18/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	4 City and State	5
MASON, FRANK	P	2503 BENEVA RD.	SARASOTA, FL	00000
~~RIDDLE, JOANNA B.~~ RITA HAYES	~~V/P~~ D	~~2601~~ BENEVA ROAD 3503	SARASOTA, FL	00000
KENNEDY, JOHN	V/P	2507 BENEVA RD.	SARASOTA, FL	00000
ISMBURT, MARY G.	T	2507 BENEVA RD	SARASOTA, FL	00000
PETERSON, MARJORIE	S	2505 BENEVA RD.	SARASOTA, FL.	
DAILEY, MAX	~~D~~ VP	2505 BENEVA RD.	SARASOTA, FL.	
KENT, MARGARET	D	2503 BENEVA RD.		

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

BYRD REALTY, INC.
6589 GATEWAY AVE.
SARASOTA, FL 33581

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____
I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer or Director signing must be listed in Block 6.)

Signature [signature] Date 3/1/88

Typed Name of Signing Officer or Director _____ Title _____ Telephone Number _____

12. Should you desire a certificate of status, check the box

CERTIFICATE OF STATUS DESIRED [ ]

CR2E034 (1-88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST AND

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1989 MAR 21 AM 11:05

SECRETARY OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

Please Type or Print Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

ZIP + 4

708039 3
FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP
2507 BENEVA RD
SARASOTA FLA 34232-3623

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 11/02/1964

4. Federal Employer Identification Number (FEIN): 59-6180553

5. Date of Last Report: 03/10/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
P	MASON, FRANK	2503 BENEVA RD.	SARASOTA, FL	00000
D	HAYES, RITA	2501 BENEVA ROAD	SARASOTA, FL	00000
V/P	KENNEDY, JOHN	2507 BENEVA RD.	SARASOTA, FL	00000
T	ISHEURT, MARY G.	2507 BENEVA RD	SARASOTA, FL	00000
S	PETERSON, MARJORIE	2505 BENEVA RD.	SARASOTA, FL.	
V	~~BAILEY, HAX~~ Borst, Lawrence	2503 ~~2505~~ BENEVA RD.	SARASOTA, FL.	
D	Johnson, Bert	2505 BENEVA RD.	SARASOTA, FL.	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

BYRD REALTY, INC.
6589 GATEWAY AVE.
SARASOTA, FL ~~33581~~ 3423/

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: _____ DATE: 3/8/89
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida: _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director agents must be listed in Block 6.)

Signature: John Kennedy — Date: 3/8/89

Typed Name of Signing Officer or Director — Title: VP — Telephone Number

12. If you desire a certificate of status check the box: CERTIFICATE OF STATUS DESIRED ☐ — $5.00 Additional Fee Required

P89000183

CR2E043 (1-88)

1989 Forest Lakes Country Club Estates

P	Phillips, Blake	2501	Beneva Road #1	Sarasota
V/P	Kennedy, John	2507	Beneva Road #7	Sarasota
V/P	Borst, Lawrence	2503	Beneva Road #2	Sarasota
S	Peterson, Marjorie	2501	Beneva Road #7	Sarasota
T	Johnson, Bert	2505	Beneva Road #4	Sarasota
D	Hayes, Rita	2503	Beneva Road #9	Sarasota
D	Smith, Hazel	2501	Beneva Road #6	Sarasota

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

1990 MAY 14 PM 1:37

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

708039 3

ZIP + 4 PRESORT

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP
~~2507 BENEVA RD~~
~~SARASOTA FLA 34237~~

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21
4801 S. Tamiami Tr. Suite 3

PO Box No 22

City and State 23
Sarasota, Florida

Zip Code 24
34231

3 Date Incorporated or Qualified To Do Business in Florida: 11/02/1964

4 FEI Number: 59-6180553

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
P	~~PHILLIPS, BLAKE~~	~~2501 BENEVA RD. #1~~	~~SARASOTA, FL~~	~~00000~~
	PETERSON, MARJORIE	#7		34232
D	~~PHILLIPS, PHILLIP~~	~~2503 BENEVA RD #8~~	~~BINGHAMTON, N.Y.~~	
	BORST, LAWRENCE	#2	SARASOTA, FL.	34232
V/P	~~DIFFLEY, MIKE~~	~~2503~~ BENEVA RD. #7	~~SARASOTA, FL~~	~~00000~~
		2507		34232
V/P	~~BORST, LAWRENCE~~	~~2503 BENEVA RD. #2~~	~~SARASOTA, FL~~	~~00000~~
	LUTES, LOYAL	2507 BENEVA RD. #8		34232
D/S	~~JOHNSON, BERT~~	~~2505 BENEVA RD.~~	~~ENDICOTT, N.Y.~~	
	HAYES, RITA	2503 BENEVA RD. #8	SARASOTA, FL.	34232
D	SMITH, HAZEL	2501 BENEVA RD. #6	SARASOTA, FL.	34232

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

~~BYRD REALTY, INC.~~
~~6580 GATEWAY AVE.~~
~~SARASOTA, FL 33581~~

8 Name and Address of New Registered Agent

Name 81
MILLER MANAGEMENT SERVICES

Street Address 1 (Do NOT Use P.O. Box Number) 82
4801 S. TAMIAMI TR. SUITE 3

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: SARASOTA, FL.

Zip Code 85: 34232

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent at an office with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Fred D. Heckman (Registered Agent Accepting Appointment) DATE: 5/9/90

10 I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

SIGNATURE: Marjorie E. Peterson Date: 5-8-90

Typed Name of Signing Officer or Director: Marjorie E. Peterson

Title: President

Telephone Number: (813) 923-5811

11 If you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
MAY - 3 91
FLORIDA DEPT. OF STATE
CORPORATION
TALLAHASSEE
FILED

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation

DOCUMENT # 708039 (3)

ZIP + 4 PRESORT

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.
4801 S TAMIAMI TRL STE 3
SARASOTA FLA 34231-4300

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified to Do Business in Florida: 11/02/1964

4. FEI Number: 59-6180553

☐ FEI Number Applied For

☐ FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

☐ CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	
1	P D/S	PETERSON, MARJORIE	2501 BENEVA RD 7	SARASOTA, FL	00000
2	~~D~~ D/P	~~BORST, LAWRENCE~~ Lewers, Marianne	~~2503 BENEVA RD 2~~ 2507 Beneva Rd. #7	SARASOTA, FL	
3	~~V/P~~ D/VP	~~DIFFLEY, MIKE~~ Riddle, Joanna	~~2507 BENEVA RD 7~~ 2501 Benva Rd. #8	SARASOTA, FL	00000
4	~~V/P~~ D	~~LUTES, LOYAL~~ Bahnfleth, Peg	~~2507 BENEVA RD 8~~ 2507 Beneva Rd. #5	SARASOTA, FL	00000
5	~~D/S~~ D	HAYES, RITA	2503 BENEVA RD 8	SARASOTA, FL	
6	D	~~SMITH, HAZEL~~ Allen, Viola	~~2501 BENEVA RD. #6~~ 2503 Beneva Rd. #1	SARASOTA, FL.	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MILLER MANAGEMENT SERVICES
4801 S TAMIAMI TRL STE 3
SARASOTA, FL 34232

8. Name and Address of New Registered Agent

81 Name: SAME

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City: FL. 85 Zip Code:

9. Pursuant to the provisions of Section 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 6 or 7 on an attachment with an asterisk.

SIGNATURE Marianne Lewers DATE 5-3-91

Name of Person Signing (Officer or Director): Marianne Lewers

Title: President

Telephone Number (Daytime): (813) 922-3786

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1992 MAY -7 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Read instructions on Other Side Before Making Entries

FILING FEE $61.25 Make Payable To: *Secretary of State*

1. Name and Mailing Address of Corporation DOCUMENT # 708039

Forest Lakes Country Club Estates Condominium
Apartments Association, Inc.
C/O Keys-Caldwell, Inc.
250 Tampa Ave., West
Venice, Fl 34285

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 11/02/64

3a. Date of Last Report 5/9/91

4. FEI Number 59-6180553

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 Additional Fee Required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	D/P	Riddle, Duncan	2501 Beneva Rd. #8	Sarasota, Fl
2	D/S/T	Allen, Viola	2503 Beneva Rd. #1	Sarasota, Fl
3	D	Bahnfleth, Peg	2507 Beneva Rd. #5	Sarasota, Fl
4	D/VP	Shepard, Kenneth	2501 Beneva Rd. #7	Sarasota, Fl
5	D	Smith, Hazel	2501 Beneva Rd. #6	Sarasota, Fl
6				

5/7/92 B.B.S.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

81 Name: Keys-Caldwell, Inc.

82 Street Address 1 (Do NOT Use P.O. Box Number): 250 Tampa Ave., West

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City: Venice FL. | 85 Zip Code: 34285

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

Signature of Registered Agent Accepting Appointment: Barbara Spitzer Keys-Caldwell Inc DATE 4/20/92

10. This corporation has timely for intangible tax under s. 199.032, Florida Statutes: Yes ☒ No ☐ (See other side for information on intangible tax.)

11. I certify that the information set forth on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE D. Riddle DATE

Typed Name of Signing Officer or Director: Duncan Riddle | Title: President | Telephone Number Daytime: (813) 355-7020

12. If you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

File Now. Filing Fee after May 1 is $225.00

Remitted in time.

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
93 JUN 17 AM 10:52

1. Name and Mailing Address of Corporation: DOCUMENT # 708039 (3)

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.
C/O KEYS-CALDWELL, INC.
250 TAMPA AVE W
VENICE FL 34285-1729

If mailing name or address is incorrect in any way, line through incorrect information and enter correction in Block 2.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
11/02/1964	05/07/1992

FILING FEE	ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
$200.00	MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 596180553 — Applied For / Not Applicable

2. Mailing Address
21 5550 Bee Ridge Rd.
Suite, Apt. #, etc.
22 Suite E-3
City & State
23 Sarasota, FL
Zip 24 34233 Country 25 USA

2a. Principle Place of Business
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $138.75 Supplemental Fee Not Required

8. This corporation has elected to file its annual report under s. 1[illegible] Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KEYS-CALDWELL, INC.
250 TAMPA AVE., WEST
VENICE FL 34285

10. Name and Address of New Registered Agent

81 Barbara J. Ambrose
Management Concepts of Sarasota County, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
5550 Bee Ridge Road, E-3
83
84 City Sarasota FL 85 Zip Code 34233 86 County USA

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.
I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Barbara Ambrose DATE 5/7/93

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS CHANGES
1.1 TITLE: D/P	1.1 TITLE: D
1.2 NAME: RIDDLE, DUNCAN	1.2 NAME:
1.3 ADDRESS: 2501 BENEVA RD #8	1.3 ADDRESS:
1.4 CITY-ST-ZIP: SARASOTA, FL 00000	1.4 CITY-ST-ZIP:
2.1 TITLE: D/S/T	2.1 TITLE:
2.2 NAME: ALLEN, VIOLA	2.2 NAME:
2.3 ADDRESS: 2507 BENEVA RD #1	2.3 ADDRESS:
2.4 CITY-ST-ZIP: SARASOTA FL	2.4 CITY-ST-ZIP:
3.1 TITLE: D	3.1 TITLE: D/V
3.2 NAME: BANNFLETH, PEG	3.2 NAME: NIELSEN, BRAD
3.3 ADDRESS: 2501 BENEVA RD #5	3.3 ADDRESS: 2507 BENEVA ROAD #2
3.4 CITY-ST-ZIP: SARASOTA, FL 00000	3.4 CITY-ST-ZIP: SARASOTA FL 34232
4.1 TITLE: D/V	4.1 TITLE: D/P
4.2 NAME: SHEPARD, KENNETH	4.2 NAME:
4.3 ADDRESS: 2507 BENEVA RD #7	4.3 ADDRESS:
4.4 CITY-ST-ZIP: SARASOTA, FL 00000	4.4 CITY-ST-ZIP:
5.1 TITLE: D	5.1 TITLE: D
5.2 NAME: SMITH, HAZEL	5.2 NAME: SMOLLAR, JOE
5.3 ADDRESS: 2503 BENEVA RD #6	5.3 ADDRESS: 2505 BENEVA ROAD #7
5.4 CITY-ST-ZIP: SARASOTA FL	5.4 CITY-ST-ZIP: SARASOTA FL 34232
6.1 TITLE:	6.1 TITLE:
6.2 NAME:	6.2 NAME:
6.3 ADDRESS:	6.3 ADDRESS:
6.4 CITY-ST-ZIP:	6.4 CITY-ST-ZIP:

100000642371
-07/09/93-01146-004
$***200.00 $***200.00

14. I hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 with any changes noted in an attachment.

SIGNATURE Viola M. Allen DATE 4/24/93

Name of Person Signing (Type or Print) Viola Allen
Title Secretary-Treasurer
Daytime Telephone Number (813) 371-5200

FOREST LAKES COUNTRY CLUB ESTATES

1993

BOARD OF DIRECTORS

PRESIDENT

Ken Shepard
2501 Beneva Road #7 — 923-7205

VICE PRESIDENT

Brad Nielsen
2507 Beneva Rd. #2 — 921-5846

SECRETARY/TREASURER

Viola Allen
2503 Beneva Rd. #1 — 921-4989

MEMBERS

Duncan Riddle
2507 Beneva Road #8 — 922-5542

Joe Smollar
2505 Beneva Road #7 — 922-0920

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

FILED

94 APR 11 AM 7:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM AP ARTMENTS ASSOCIATION INC.

DOCUMENT #
708039 (3)

Mailing Address	Principal Place of Business
5550 BEE RIDGE RD. SUITE E-3 SARASOTA FL 34233	5550 BEE RIDGE RD. SUITE E-3 SARASOTA FL 34233

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address (21)	2a. Principal Place of Business (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

3. Date Incorporated or Qualified: 11/02/1964

3a. Date of Last Report: 06/17/1993

4. FEI Number: 59-6180553 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired $8.75 ☐

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Nonprofit Exempt from $138.75 Supplemental Fee ☐

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MANAGEMENT CONCEPTS OF SARASOTA COUNTY INC 5550 BEE RIDGE RD. SUITE E-3 SARASOTA FL 34233	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE Dana M Reed DATE 4/1/94

[illegible]

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~D~~	11 TITLE	D
NAME	~~RIDDLE, DUNCAN~~	12 NAME	Demangone, Norma
STREET ADDRESS	~~2501 BENEVA RD #8~~	13 STREET ADDRESS	2505 Beneva Road #6
CITY-ST-ZIP	~~SARASOTA FL~~	14 CITY-ST-ZIP	Sarasota FL 34232
TITLE	D/S/T	21 TITLE	
NAME	ALLEN, VIOLA	22 NAME	
STREET ADDRESS	2507 BENEVA RD #1	23 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	24 CITY-ST-ZIP	
TITLE	D/V	31 TITLE	D
NAME	NIELSON BRAD	32 NAME	
STREET ADDRESS	2507 BENEVA RD #1	33 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	34 CITY-ST-ZIP	
TITLE	D/P	41 TITLE	
NAME	SHEPARD, KENNETH	42 NAME	
STREET ADDRESS	2507 BENEVA RD #7	43 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	
NAME	SMOLLAR JOE	52 NAME	
STREET ADDRESS	2505 BENEVA RD. #7	53 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	D
NAME		62 NAME	Perry, Annette
STREET ADDRESS		63 STREET ADDRESS	2501 Beneva Road, #4
CITY-ST-ZIP		64 CITY-ST-ZIP	Sarasota FL 34232

14. I do hereby certify that the information supplied with this filing is [illegible] and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath [illegible]

SIGNATURE: K Viola M. Allen 4/1/94 813-921-4989

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 11:46

DOCUMENT # 708039 (3)

1. Corporation Name

FOREST LAKES COUNTRY CLUB ESTATES CONDOMINIUM APARTMENTS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
5550 BEE RIDGE RD. SUITE E-3 SARASOTA FL 34233	5550 BEE RIDGE RD. SUITE E-3 SARASOTA FL 34233

3. Date Incorporated or Qualified: 11/02/1964
3a. Date of Last Report: 04/11/1994
4. FEI Number: 59-6180553 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MANAGEMENT CONCEPTS OF SARASOTA COUNTY INC
5550 BEE RIDGE RD.
SUITE E-3
SARASOTA FL 34233

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	DEMANGONE, NORMA	1.2 NAME	
STREET ADDRESS	2505 BENEVA RD #6	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	DST	2.1 TITLE	☐ Change ☐ Addition
NAME	ALLEN, VIOLA	2.2 NAME	
STREET ADDRESS	2507 BENEVA RD #1	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	NIELSON, BRAD	3.2 NAME	
STREET ADDRESS	2507 BENEVA RD #1	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE	DP	4.1 TITLE	☐ Change ☐ Addition
NAME	SHEPARD, KENNETH	4.2 NAME	
STREET ADDRESS	2507 BENEVA RD #7	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	SMOLLAR, JOE	5.2 NAME	
STREET ADDRESS	2505 BENEVA RD. #7	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	PERRY, ANNETTE	6.2 NAME	
STREET ADDRESS	2501 BENEVA ROAD #4	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP	

14. I (We) hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Viola M. Allen 4/6/95 813-921-4989
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

708054

ADDITIONAL OFFICERS AND DIRECTORS

ADDITION

D
RIDDLE, DUNCAN
2501 BENEVA ROAD #8
SARASOTA FL