

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709182

FILED  
Mar 17, 2008  
Secretary of State

**Entity Name:** FOREST HILLS CIVIC ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

1749 HARPON DRIVE  
HOLIDAY, FL 34690 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3262  
HOLIDAY, FL 34690 US

**New Mailing Address:**

P.O. BOX 3262  
HOLIDAY, FL 34692 US

**FEI Number:** 59-1774557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BETTS, ERNEST C III  
3837 HOLIDAY LAKE DR  
HOLIDAY, FL 34691 US

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

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: TROY, GORDON  
Address: 5828 CORKWOOD COURT  
City-St-Zip: HOLIDAY, FL 34690

Title: SD ( ) Delete  
Name: KIRSTEN, JANE  
Address: 1627 DOUBLOON DR.  
City-St-Zip: HOLIDAY, FL 34690

Title: PTD ( ) Delete  
Name: BETTS, ERNEST C III  
Address: 3837 HOLIDAY LAKE DR  
City-St-Zip: HOLIDAY, FL 34691

Title: D ( ) Delete  
Name: THOMPSON, STAN  
Address: 1227 BASSWOOD DR  
City-St-Zip: HOLIDAY, FL 34690

Title: D ( ) Delete  
Name: BRESCIA, JOHN  
Address: 1730 HARPON DR  
City-St-Zip: HOLIDAY, FL 34690

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: NOLAN, FRAN  
Address: 5320 CELCUS DR  
City-St-Zip: HOLIDAY, FL 34690

Title: D ( ) Change (X) Addition  
Name: NOLAN, MARY  
Address: 5320 CELCUS DR  
City-St-Zip: HOLIDAY, FL 34690

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERNEST C. BETTS, III

PRES

03/17/2008

Electronic Signature of Signing Officer or Director

Date