2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719856

FILED Feb 05, 2008 Secretary of State

Entity Name: FOREST LAKES COUNTRY CLUB ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 7226 1859 RIVIERA CIR PINECRAFT STATION SARASOTA, FL 34232 US SARASOTA, FL 34278 US New Mailing Address: **Current Mailing Address:** P.O. BOX 7226 PO BOX 7226 PINECRAFT STATION PINECRAFT STATION SARASOTA, FL 34278 US SARASOTA, FL 34278 FEI Number: 59-1404474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BASS, VICTORIA 2032 ŔIVIERA DR SARASOTA, FL 34232 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TOOLEY, ADAM Name: Name: 1811 BROOKHAVEN DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition KEMPER, CHRIS Name: Name: BASS, VICTORIA Address: 2039 RIVIERA DR. Address: 2032 RIVIERA DR. City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 Title: () Delete Title: (X) Change () Addition BASS, VICTORIA GANEY, JOANN F Name: Name: 2032 RIVIERA DRIVE 1859 RIVIERA CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 Title: TD (X) Delete Title: () Change () Addition Name: GANEY, JOANN F Name: 1859 RIVIERA CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip:

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: JOANN GANEY TD 02/05/2008