2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729781

FILED Jul 10, 2006 Secretary of State

Entity Name: FORESTBROOK I ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 700 STARKEY ROAD LARGO, FL 33771 **Current Mailing Address: New Mailing Address:** 700 STARKEY ROAD LARGO, FL 33771 FEI Number: 59-1763274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TROSCHINETZ, MICHAEL J 700 STARKEY RD. #911 LARGO, FL 33771 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: () Delete (X) Change () Addition IRVINE, JAN IRVINE, JAN Name: Name: 700 STARKEY RD # 714 Address: 700 STARKEY RD # 714 Address: City-St-Zip: LARGO, FL 33771 US City-St-Zip: LARGO, FL 33771 US Title: () Delete Title: () Change () Addition Name: BOBERG, GENE Name: Address: 700 STARKEY RD # 512 Address: City-St-Zip: LARGO, FL 33771 City-St-Zip: Title: () Delete Title: () Change () Addition PAUL, SHARON Name: Name: 700 STARKEY RD. #821 Address: Address: City-St-Zip: LARGO, FL 33771 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: TROSCHNIETZ, MICHAEL J Name: 700 STARKEY RD # 911 Address: Address: City-St-Zip: LARGO, FL 33771 City-St-Zip: Title: () Delete Title: VD (X) Change () Addition BARKATT, JAMES T SELLS, GAY Name: Name: 700 STARKEY RD # 613 700 STARKEY RD #711 Address: Address: City-St-Zip: LARGO, FL 33771 City-St-Zip: LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify for the 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: JAN IRVINE TD 07/10/2006